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INSTITUTE OF SOCIAL
MEDICINE

10. PARKS ROAD,
OXFORD

COUNTY COUNCIL OF THE COUNTY OF LANARK

ANNUAL REPORTS

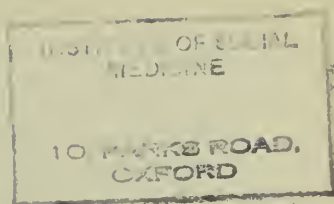
OF THE

COUNTY MEDICAL OFFICER
OF HEALTH

AND THE

COUNTY SANITARY INSPECTOR

FOR THE YEAR 1948



COUNTY COUNCIL OF THE COUNTY OF LANARK.

ANNUAL REPORTS

OF THE

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COUNTY SANITARY INSPECTOR

FOR THE YEAR 1948.

GLASGOW:

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MCMXLVIII

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COUNTY COUNCIL OF THE COUNTY OF LANARK.

ANNUAL REPORT

STATISTICS.

The estimated population for 1948, according to figures supplied by the Registrar-General, was as follows :—

County of Lanark (Landward)	...	...	...	310,533
Burgh of Biggar	...	...	...	1,363
Burgh of Lanark	...	...	...	6,230
Total	...	...	...	318,126

The number of **Occupied** and **Unoccupied** Houses, as given in the Valuation Roll, was 76,310 and 415 respectively, inclusive of Small Burghs, made up as follows :—

		Occupied Houses.	Unoccupied Houses.
County of Lanark (Landward)	...	74,087	399
Burgh of Biggar	...	471	9
Burgh of Lanark	...	1,752	7
		76,310	415

Statistical Tables.—Table A shows the birth-rate and death-rate per thousand of the population and the infantile deaths per thousand births.

TABLE A.—BIRTH-RATES AND DEATH-RATES PER 1,000 OF THE POPULATION. INFANTILE DEATHS PER 1,000 BIRTHS.

					Infants under 1 year.	
Year.	Births.	Birth-rate.	Deaths.	Death-rate.	Deaths.	Death-rate.
<i>Quinquennial</i>						
<i>Average—</i>						
1936-40	5,866	19·26	3,632	12·01	450	76·7
1941	6,249	19·4	3,828	12·6	526	84
1942	5,997	18·7	3,489	11·7	414	69
1943	6,369	20·0	3,666	12·6	428	67
1944	6,480	20·2	3,458	11·8	422	65
1945	5,828	18·2	3,382	11·5	339	58
<i>Quinquennial</i>						
<i>Average—</i>						
1941-45	6,184	19·3	3,564	12·0	425	68
1946	6,537	21·4	3,556	11·7	355	54
1947	7,149	22·6	3,675	11·6	363	51
1948	6,357	20·0	3,435	10·8	317	50

The following is a summary of principal causes of deaths, extracted from the Registrar-General's returns :—

At all ages	...	...	...	...	...	...	3,435
Infants under one year	...	...	...	...	...	...	317
<hr/>							
Typhoid Fever	...	...	...	...	...	...	1
Diphtheria	...	...	...	...	...	...	7
Scarlet Fever	...	...	...	...	...	...	—
Smallpox	...	...	...	...	...	...	—
Measles	...	...	...	...	...	...	4
Whooping Cough	...	...	...	...	...	...	5
Cerebro-spinal Fever	...	...	...	...	...	...	3
Acute Infective Jaundice	...	...	...	...	...	...	—
Influenza	...	...	...	...	...	...	12
Malignant Diseases	...	...	...	...	...	...	468
Tuberculosis-Pulmonary	...	...	...	...	...	...	247
Tuberculosis—All other forms	31
Diabetes	31
Bronchitis	111
Pneumonia	129
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PREVALENCE OF INFECTIOUS DISEASE.

TABLE E.—NUMBER OF CASES OF INFECTIOUS SICKNESS RECOGNISED DURING 1948 :—

<i>Notifiable Diseases.</i>				Notified.	Confirmed.	Removed to Hospital.
Anthrax	...	...	...	—	—	—
Cerebro-Spinal Fever	...	...	...	34	22	33
Cholera	...	...	...	—	—	—
Continued Fever (Undulant)	...	...	...	—	—	—
Diphtheria	...	...	...	192	58	189
Dysentery	...	...	...	110	94	33
Encephalitis Lethargica	...	...	...	3	3	—
Erysipelas	...	...	...	152	148	47
Jaundice, Acute Infective	...	...	...	1	1	1
Malaria	...	...	...	4	4	—
Ophthalmia Neonatorum	...	...	...	58	56	9
Plague	...	...	...	—	—	—
Pneumonia, Acute, Influenzal	...	...	...	24	17	12
Pneumonia, Acute Primary	...	...	...	792	561	529
Pneumonia (not otherwise notifiable)	...	...	...	—	—	—
Poliomyelitis, Acute Anterior	...	...	...	2	1	1
Puerperal Fever	...	...	...	18	12	18
Puerperal Pyrexia	...	...	...	16	12	13
Scarlet Fever	...	...	...	1,240	1,139	944
Smallpox	...	...	...	—	—	—
Tetanus	...	...	...	1	1	1
Tuberculosis—Pulmonary	...	...	...	599	590	179
Tuberculosis—Non-Pulmonary	...	...	...	203	198	93
Typhoid Fever	...	...	...	1	1	1
Para-Typhoid A	...	...	...	—	—	—
Para-Typhoid B	...	...	...	6	3	6
Typhus Fever	...	...	...	—	—	—
Total				3,456	2,921	2,109

<i>Non-Notifiable Diseases.</i>				Total.	Removed to Hospital.
Chickenpox	...	...	...	405	12
Measles	...	...	...	723	22
Whooping Cough	...	...	...	120	14
Total				1,248	48

**Anthrax, Plague, Smallpox, Typhus Fever, Glanders,
Actinomycosis, Cholera.**

No notification was received in respect of any of these diseases.

Vaccination against Smallpox.

With the coming into operation on 5th July, 1948, of the National Health Service (Scotland) Act, 1947, the Vaccination (Scotland) Acts, providing for the compulsory vaccination of infants, ceased to have effect and vaccination against Smallpox was placed on the same footing as immunisation against Diphtheria.

The records submitted to this Department show that the number of persons vaccinated during the period from 5th July to 31st December, 1948 was as follows :—

				Primary Vaccination	Re- Vaccination
Typical Vaccinia greatest at 7-10th day	...			229	19
Accelerated (Vaccinoid) Reaction at 5th-7th day				—	8
Reaction greatest at 2nd-3rd day	...	...		—	1
No Local Reaction	...	...	...	12	1
Total				241	29

Diphtheria and Membranous Croup.

Table D 1 shows the cases notified and deaths registered during the past eight years, with relative rates.

TABLE D I.

Year.	Cases Notified.	Deaths Registered.	Deaths per 100 Cases.	Cases per 1,000 Population.	Deaths per 10,000 Population.
1941	834	31	3.72	2.75	1.02
1942	640	21	3.28	2.14	0.70
1943	652	13	2.0	2.24	0.45
1944	667	21	3.1	2.3	0.7
1945	476	9	1.9	1.61	0.30
<i>Quinquennial Average—</i>					
1941-45	654	19	2.9	2.20	0.63
1946	309	7	2.27	1.01	0.23
1947	173	1	0.58	0.55	0.031
1948	192	7	3.65	0.60	0.22

After admission to hospital the diagnosis was revised in 134 cases, as follows:—Positive swab, 7; sore throat, 23; scarlet fever, 3; tonsillitis (including enlarged and septic tonsils), 73; laryngitis, 7; measles, 1; bronchitis, 3; other conditions, 13. In 4 other cases no evidence of the presence of diphtheria could be detected.

The cases and deaths during each month and at certain age-periods are shown below:—

Month.		Jan.	Feb.	Mar.	Apr.	May.	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total
Cases	...	26	18	16	14	15	18	18	11	15	15	14	12	192
Deaths	...	1	1	1	—	—	—	1	—	1	1	1	—	7
Ages	...	...	-1	1-5	5-15	15-25	25-45	45-65	65+	All Ages				
Cases	...	...	4	56	77	26	23	5	1	192				
Deaths	...	...	—	—	7	—	—	—	—	7				

The number of cases removed to hospital was 189 or 98·44 per cent of the total.

Antitoxin was administered by private practitioners to 15 cases prior to their admission to hospital, and to one case which was treated at home. Two cases which were not removed to hospital received no serum, nor was it given to 174 cases before their admission.

During the year 452,000 units of antitoxin were supplied through police stations to medical practitioners. In addition to this, practitioners were supplied with 120,000 units direct from the Public Health Department.

Diphtheria Immunisation.

	Pre-school Children.	Scholars.	Total.
Immunised for first time ...	3,684	2,776	6,460
Re-activating doses ...	898	8,929	9,827

Scarlet Fever.

Table D II. shows the prevalence of scarlet fever during the past eight years, with relative rates.

TABLE D II.

Year.	Cases Notified.	Deaths Registered.	Deaths per 100 Cases.	Cases per 1,000 Population.	Deaths per 10,000 Population.
1941	789	4	0.5	2.63	0.13
1942	874	1	0.11	2.93	0.03
1943	1,287	2	0.16	4.42	0.07
1944	898	1	0.1	3.1	0.03
1945	1,149	—	—	3.09	—
<i>Quinquennial Average—</i>					
1941-45	999	2	0.2	3.23	0.05
1946	608	—	—	1.99	—
1947	833	—	—	2.63	—
1948	1,240	—	—	3.90	—

The number of cases removed to hospital was 944, or 76.13 per cent. of all the cases notified.

The age incidence of cases was :—

Ages	...	-1	1-5	5-15	15-25	25-45	45-65	65+	All ages.
Cases	...	9	299	783	101	42	5	1	1,240

Altered Diagnoses :—Of the 944 cases admitted to hospital, the diagnosis of scarlet fever was regarded as doubtful in 17 cases, while in 27 no evidence of the presence of scarlet fever could be detected. The diagnosis was revised in 57 other cases as follows :—Sore throat 16 ; tonsillitis, 14 ; bronchitis, 3 ; measles, 10 ; rhinitis, 1 ; rhinorrhoea, 2 ; other conditions, 11.

NOTIFICATION in Relation to Housing Accommodation.

The following statement shows the various sizes of houses from which patients were notified :—

		1 Apt.	2 Apts.	3 Apts.	4 Apts.	5 Apts.	Over 5 Apts.	Other	Total
Hospital	...	70	317	312	147	44	34	20	944
Home	...	5	58	97	71	27	35	3	296
Total	...	75	375	409	218	71	69	23	1,240

In the second half of the month of June an “ explosive ” outbreak of Scarlet Fever occurred in the Upper Ward area of the County. The following report was submitted at that time to the Department of Health for Scotland and to the County Council :—

Scarlet Fever Outbreak in Lanarkshire associated with an Ice Cream Café.

As there is at the present time a growing, if somewhat belated, appreciation of the need for improved hygiene in restaurants, it may be of interest to put on record the occurrence of a recent explosive outbreak of scarlet fever in Lanarkshire in which all the primary cases had visited a certain café.

In common with the rest of Scotland, scarlet fever notifications had been showing a tendency to rise, cases being distributed fairly evenly over the entire area, but on the morning of Monday, 14th June, 11 notifications were received from the Upper Ward area alone, 10 of the cases having been removed to hospital the previous day. This being obviously an untoward and unusual incidence, an assistant medical officer was detailed to investigate the position.

The immediate point noted was that all cases had attended the Lanimer Day Celebrations in Lanark on Thursday, 10th June, and the suspicion was aroused that a certain café might be implicated. The following day, (Tuesday 15th) a further 17 notifications were received, again from the same vicinity, by which time it was discovered that every case without exception had visited this suspected café and that the article of diet common to all was ice-cream.

A visit was forthwith made to this shop but the proprietor was not available, unfortunately, until 4 p.m. (15th). The staff on duty on this date numbered 4: the proprietor and his daughter were well and had not been ill: one waitress was found to have a temperature of 100° and was complaining of sore throat the other waitress had been off work from 24th to 26th May with a sore throat but had resumed work on 27th. She was found to be desquamating and had a frankly discharging nose. Of 5 others who had been employed in the café on Lanimer Day one had resigned but was found at home to be desquamating and to have a severe nasal discharge with excoriation and crusting: one had gone home on the morning of 15th June (there found to have follicular tonsillitis): one had gone off on 12th June (at home found to have follicular tonsillitis): one other was well and developed a sore throat two days after serving in the café.

In view of the potential dangers of the position, the two ill girls having, of course, been sent home, detailed instructions were given with regard to disinfection of the premises, utensils, etc., and on the following day it was found that this disinfection could not be carried out satisfactorily if the café were allowed to continue to function. The proprietor thereupon agreed temporarily to close the premises while

fumigation and scrubbing with soap and water were carried out. The furniture and fixtures were also scrubbed with soap and water and the glasses, spoons and crockery were boiled. The café remained closed for five days. On re-opening only those who had been well and had negative swabs, nasal and throat, were allowed on duty.

Meantime all new cases as they came to notice were being followed up and by this date (15th) 3 cases had been found at dairy farms. These were, of course, immediately removed to hospital and all necessary steps taken at the farms to prevent the spread of infection. The milk produced, unless already going for pasteurisation, was diverted for this purpose and the Medical Officers of Health of the Cities and Burghs concerned informed of the position. Their interest and collaboration were very much appreciated as was also that of the Milk Marketing Board.

By this time it was manifest that there was a high incidence of sore throats occurring in the district and while it was realised that, in accordance with the requirements of the Milk and Dairies Acts, producers of milk are required to notify to the Medical Officer of Health any sore throat occurring in their families or workers, it was considered advisable that more should be done to ascertain the actual health conditions at the farms. Accordingly, arrangements were made for the 498 registered dairy farms in the Upper Ward to be visited and, as in the case of farms where actual cases occurred, for the milk supply to be switched for pasteurisation from any premises in which there was an individual suffering from sore throat. This visitation was carried out in two days by a staff of 10 Sanitary Inspectors and 4 Milk Officers. That this precaution was worth while was shown by the fact that 14 farms had illness requiring further medical scrutiny, 13 being sore throats and 1 a case of mumps.

Owing to the possibly increased demand on pasteurising plant, steps were taken in the County to check up on the efficiency of the process, and the Medical Officers of Health of the Burghs were apprised of the circumstances and were willing to take similar measures in their areas. It is of interest to note that all samples satisfied the requirements of the phosphatase test.

Satisfaction can be expressed that no case came to the notice of the Public Health Department which could in any way be attributable to milk.

The following tables show the incidence of the disease according to date of onset for the period from 1st June to 3rd July, and the age distribution of the cases. The sex and age differences between cases connected with the café and other cases occurring in the County are not statistically significant.

Table 1.—Cases of Scarlet Fever.

Date of Onset.		Upper Ward (Pop. 51,000)				Remainder of County. (Pop. 254,000)				Total.	
		Connected with Café.		Others		Connected with Café.		Others			
		M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
June, 1-5	...	—	—	1	1	—	—	6	3	7	4
June 6-12	...	17	21	7	2	—	—	5	11	29	34
June 13-19	...	19	32	8	10	1	3	9	10	37	55
June 20-26	...	2	1	5	8	—	—	9	8	16	17
June 27-July 3		—	1	8	7	—	—	12	18	20	26
Total	...	38	55	29	28	1	3	41	50	109	136

Table 2.—Age Distribution of Cases.

Age.	Upper Ward.				Remainder of County.			
	Connected with Café		Others.		Connected with Café.		Others.	
	M.	F.	M.	F.	M.	F.	M.	F.
0-1 year	—	—	—	—	1	—
1-4 years	10	9	7	5	10	11
5-9 years	11	19	14	11	24	24
10-14 years	7	13	6	5	6	12
15-24 years	6	7	—	5	—	3
25 and over	4	7	2	2	—	—
Total	38	55	29	28	41	50

Nasal and throat swabs were taken from all cases and typed in a limited number. These typed were those from :—

(a) Waitresses with discharging nose ;

(b) a representative number of patients known to have been visitors to the café ; and

(c) a representative number of patients in whose case no direct contact with the café was discoverable.

In the case of both waitresses type 23 was found. In all group (b) type 23 was present and while in group (c) an occasional 23 did arise there was no uniformity. Indeed five other types were thrown up.

Of the total of 147 cases occurring between 10th and 19th June, 91 were admitted to hospital—the remainder being left at home when isolation was to the satisfaction of the Public Health Department and where the mother was reasonably likely to carry out instructions. Of the total cases occurring during this period, 93 were associated with the café.

Clinically, the illness in all cases conformed to the present-day pattern, viz., mild and with no marked toxæmia. There was no death.

The other 24 cases occurring in the Upper Ward area during the period 10th to 19th June, and so far as can be discovered, unconnected with the café outbreak, occurred in 12 localities widely scattered, and no common factor whatsoever could be elicited. It may be, of course, that there was an increased incidence of "carriers" and owing to the long period of comparative freedom from this disease there was a high proportion of susceptibles. The streptococcal type, as already indicated, varied.

Summary.

An explosive outbreak of scarlet fever occurred in Lanarkshire, co-incident with an increased incidence throughout the area generally.

From the investigation carried out, the immediate source of the "explosion" was traced to a café where two "missed" cases showing desquamation and definite nasal discharge with excoriation and scab formation were found. The common foodstuff partaken of was ice-cream, but on bacteriological examination of this product no pathogenic organisms were isolated—possibly due to the fact that the ice-cream was not submitted to bacteriological examination on the appropriate day—and while it is therefore bacteriologically impossible actually to incriminate the ice-cream, the café was undoubtedly the source of infection, as is shown by the fact that the incidence came under control when the café was closed (see above statistical tables).

Opportunity was taken to impress upon the proprietor the need for keeping an observant eye on the health of his staff. At the same time there was emphasised the need for strictest hygiene in all matters pertaining to the conduct of his business.

As a footnote it should be stated that the two "missed" cases submitted themselves to a medical examination when sore throat developed and were considered to be simple tonsillitis. Opportunity was taken in view of this circumstance and the general prevalence of sore throat, to circularise all practitioners in the administrative area drawing their attention to this incidence and asking for their co-operation in the investigation of cases.

Enteric Group.

Table D III. shows the prevalence of typhoid fever during the past eight years, with relative rates.

TABLE D III.

Year.	Cases Notified.	Deaths Registered.	Deaths per 100 Cases.	Cases per 1,000 Population.	Deaths per 10,000 Population.
1941	45	1	2.2	0.15	0.03
1942	26	1	3.84	0.08	0.03
1943	17	—	—	0.06	—
1944	7	1	14.3	0.02	0.03
1945	3	—	—	0.01	—
<i>Quinquennial Average—</i>					
1941-45	20	1	5.0	0.06	0.03
1946	4	—	—	0.01	—
1947	5	1	20.00	0.016	0.031
1948	7	1	14.29	0.022	0.032

The monthly and age incidence of cases and deaths was as follows :—

Month.	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total
Cases	1	—	1	—	1	—	—	3	1	—	—	7
Deaths	1	—	—	—	—	—	—	—	—	—	—	1
Ages	—1	1-5	5-15	15-25	25-45	45-65	65+	All ages.				
Cases	—	1	2	1	3	—	—	7				
Deaths	—	—	—	—	1	—	—	1				

All the cases were removed to hospital and in three cases the diagnosis was found to require revision. The altered diagnoses were as follows :— Positive agglutination, 2 ; positive faeces, 1.

Cerebro-Spinal Meningitis.

Thirty-four cases, 3 deaths. Thirty-three cases were treated in hospital. After observation, the diagnosis was revised in 12 cases, as follows :—Lymphocytic meningitis, 1 ; pneumococcal meningitis, 1 ; meningismus, 2 ; septicaemia, 1 ; peri-nephritis, 1 ; pneumonia, 1 ; pulmonary collapse, 1 ; enteritis, 1 ; negative, 3.

Pneumonia.

Eight hundred and sixteen cases were brought to the notice of the Department, 725 cases being notified, and 81 discovered from the Registrars' Returns of Deaths.

Five hundred and forty-one cases, or 66·42 per cent, were removed to hospital.

Table D IV. shows the prevalence of pneumonia (acute primary and influenzal) during the past eight years, with relative rates. It should be remembered that deaths from influenzal pneumonia are not included in these figures.

TABLE D IV.

Year.	Cases Notified.	Deaths Registered.	Deaths per 100 Cases.	Cases per 1,000 Population.	Deaths per 10,000 Population.
1941	1,181	191	16·17	3·89	6·29
1942	1,099	167	15·2	3·68	5·59
1943	1,219	164	13·45	4·19	5·63
1944	1,042	139	13·3	3·6	4·8
1945	919	147	15·9	3·12	5·0
<i>Quinquennial</i>					
<i>Average—</i>					
1941-45	1,092	161	14·8	3·69	5·46
1946	1,155	178	15·41	3·78	5·83
1947	881	130	14·76	2·78	4·10
1948	816	129	15·81	2·56	4·05

Mortality.—The deaths due to pneumonia numbered *129, giving a fatality-rate of 15·81 per cent, and a death rate of 0·405 per 1,000 of the population.

The distribution of cases and deaths throughout the year is shown below :—

Month.	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total
Cases ...	77	55	89	92	62	47	39	37	43	49	82	144	816
Deaths ...	12	8	12	16	10	7	5	11	8	9	14	17	129

*This figure does not include 1 death from Influenzal Pneumonia, this death, in accordance with the instructions of the Registrar-General, being included in the Influenzal Group.

The age-distribution of cases and deaths, together with the fatality-rate in each group, are given in the following table :—

		All ages	-1	1-5	5-15	15-25	25-45	45-65	65 and over.
Cases—Primary	...	792	139	184	113	74	96	109	77
Influenzal	...	24	—	3	5	2	4	9	1
Total	...	816	139	187	118	76	100	118	78
Deaths	...	129	55	10	1	3	6	15	39
Fatality-rate	...	15.81	39.57	5.35	0.85	3.95	6.0	12.71	50.0

Of the 129 deaths from pneumonia, 10 had taken place before notification was received, 92 occurred in cases which were not notified at all, and of the remaining 27 the following tabular statement shows the day of illness on which notification was obtained :—

Day of illness	...	1	2	3	4	5	6	7	8	9	10	11	12	Over 12	Not stated.	Total.
Fatal Cases	...	2	5	5	5	4	1	1	1	—	1	—	1	1	—	27

Information with reference to the day of illness, on which each case was notified was recorded in 703 cases, as follows :—

Day of illness	...	1	2	3	4	5	6	7	8	9	10	11	12	Over 12	Died before notification.
Cases Notified	...	7	50	90	126	97	78	41	46	19	24	22	15	78	10

Facilities for the treatment of Pneumonia :—

Cases treated at home, 275 ; 59 deaths. Cases treated in hospital, 541 ; 70 deaths. Total cases, 816 ; 129 deaths.

HOUSING CONDITIONS.—Number of Apartments.

		1	2	3	4	5	Over 5	Not stated.	Total.
Home	...	38	45	82	42	7	5	56	275
Hospital	...	97	126	184	71	22	12	29	541
Total	...	135	171	266	113	29	17	85	816

Encephalitis Lethargica.

Four cases were discovered from the Registrars' Returns of Deaths, one having been notified during previous years. The duration of illness in one of the cases which had not been notified was over 16 years but no information was available regarding the others.

Acute Infective Jaundice.

One case. Patient, who was employed in a colliery in Bothwell Parish, was admitted to the County Hospital, Motherwell, and was discharged well on completion of treatment. Bacteriological confirmation of the disease was obtained.

Subsequently, information was received from the Chief Sanitary Inspector, Motherwell that a patient, residing in his area and employed at the same colliery, had been removed to hospital suffering from acute infective jaundice.

A live rat captured at this colliery was found, on examination, to be carrying virulent leptospirae icterohaemorrhagiae.

No other cases of suspicious illness were discovered among the patients' fellow-workmen.

Infectious and Contagious Diseases among School Children.

During the year 2,126 cases of non-notifiable infectious diseases, were notified by the Executive School Medical Officer and Head Masters, as follows :—

Measles	723	Ringworm	17
Whooping Cough ...	120	Itch	5
Scabies	414	Impetigo	69
Conjunctivitis	2	German Measles ...	12
Eczema	—	Chickenpox	405
Mumps	359		

Venereal Diseases.

With the coming into operation on 5th July, 1948, of the National Health Service (Scotland) Act, 1947, responsibility for the treatment of venereal diseases devolved upon the Western Regional Hospital Board and the primary responsibility for following up persons under treatment rests with the hospital organisation.

The Local Health Authority is, of course, still concerned in the epidemiology and prevention of the disease, and may also be concerned, within the scope of their arrangements under Section 27 of the Act, in co-operating with the work of the venereal disease treatment centres as regards the follow up of persons under treatment, or known, or believed to be sources of infection.

The following statistical statement shows the numbers of fresh County Cases dealt with at the various outdoor clinics from 1/1/48 to 4/7/48. Information with regard to in-patient treatment will be found in the report for the County Hospital, Motherwell :—

Centre.	Fresh Cases.						Total Attendances	
	Syphilis		Gonorrhoea		Others.		of all cases.	
	M.	F.	M.	F.	M.	F.	M.	F.
County Hosp., Motherwell	8	6	10	7	3	1	895	568
Coathill ...	7	—	21	—	1	1	210	117
Hamilton ...	5	8	18	7	8	4	906	833
Wishaw ...	4	1	17	1	1	—	148	90
Total ...	24	15	66	15	13	6	2,159	1,608
	39		81		19		3,767	
	139							

OUT-PATIENT DEPARTMENT.

Nature of Clinic.	Sessions.		New Cases.	Attendances.
*Diabetes ...	122	[	91	1,567
*Anaemia ...			80	543
*Ophthalmic ...	33		192	494
Dental ...	310		713	3,097
*Venereal Diseases ...	—		35	1,463
*Orthopaedic (Non-Tuberculosis) ...	206		455	2,079
*Orthopaedic (After-care) ...	129		—	942
<i>Rehabilitation.</i>				
(a) Pulmonary Tuberculosis ...	6		36	30
(b) Others ...	4		27	23

*The Western Regional Hospital Board assumed responsibility for the administration of these clinics from 5th July, 1948. The figures shown therefore relate only to the period from 1st January to 4th July, 1948.

Scabies Scheme.

Cases Notified ... ..	...	...	...	548
Treatment Given (a) at Clinics	...	...	...	2,373
(b) Domiciliary	...	...	...	228
Total				3,149

MEDICAL CARE AND NURSING OF SICK POOR.

The National Assistance Act, 1948, which came into operation on 5th July, 1948, terminated the existing poor law. From that date the National Assistance Board assumed responsibility for granting cash assistance to persons in need for whom the Local Authority had hitherto been responsible.

The National Health Service (Scotland) Act, 1947, which also came into operation on 5th July, 1948, provided for the establishment of a comprehensive health service for Scotland. From that date every man, woman and child in Scotland was able to get without medical fees whatever help, care and attention were needed for health. This meant the abolition of the Domiciliary Poor Law Medical Service.

Also from that date the Western Regional Hospital Board became responsible for the provision of hospital accommodation.

The number of persons who received outdoor medical relief in the Council's area is not available, but on 4th July, 1948, there were 9,504 persons on the Social Welfare Roll liable to receive medical relief.

The number of County Social Welfare persons who received medical treatment in Social Welfare Institutions during the period 1/1/48 to 4/7/48 was as follows :—

Institution.	In Residence 1/1/48.	Admitted.	Total Discharged or Died.	In Residence 4/7/48.
Cleland Hospital ...	128	486	474	140
Crosslaw Home ...	51	175	175	51
Thrashbush Home ...	22	16	23	15
Old Monkland Home	4	2	4	2
Hamilton Home ...	39	34	35	38
Total ...	244	713	711	246

TUBERCULOSIS.

DEATH RATES.—The death rates per 1,000 of the population for the years 1940-48 were as follows :—

	1940	1941	1942	1943	1944	1945	1946	1947	1948
Pulmonary ...	·495	·529	·579	·595	·626	·647	·670	·742	·791
Non-Pulmonary ...	·168	·227	·147	·251	·184	·187	·224	·164	·107

NEW CASES.—The following shows how the new cases were brought to notice during the years 1940, 1941, 1942, 1943, 1944, 1945, 1946, 1947 and 1948 :—

Period.	PULMONARY. New Cases			NON-PULMONARY. New Cases		
	New Cases Notified.	not Notified.	TOTAL.	New Cases Notified.	not Notified.	TOTAL.
1940 ...	233	100	333	144	94	238
1941 ...	247	133	380	144	119	263
1942 ...	337	113	450	137	109	246
1943 ...	307	165	472	136	133	269
1944 ...	356	151	507	139	121	260
1945 ...	360	146	506	120	109	229
1946 ...	418	187	605	117	126	243
1947 ...	389	206	595	85	135	220
1948 ...	354	245	599	88	115	203

The types of the new cases of **non-pulmonary tuberculosis** are classified in the following statement according to the localisation of the principal lesion present at the time of notification :—

	1940	1941	1942	1943	1944	1945	1946	1947	1948
Superficial Glands	83	92	101	114	99	89	101	80	73
Abdomen ...	33	30	40	38	26	33	26	27	20
Bones and Joints	79	59	53	60	75	47	58	61	66
Meninges ...	31	56	31	42	34	43	40	37	29
Special Organs ...	3	17	10	8	14	11	15	11	15
Abscess—									
Chest Wall ...	—	—	—	—	1	—	—	—	—
Lupus ...	2	4	3	2	5	3	2	4	—
General ...	7	5	8	5	6	3	1	—	—
	238	263	246	269	260	229	243	220	203

The established diagnosis of new cases is shown in the following tabular statements :—

PULMONARY.

	1940.	1941.	1942.	1943.	1944.	1945.	1946.	1947.	1948.
	Per	Per	Per	Per	Per	Per	Per	Per	Per
Total. Cent.	Total. Cent.	Total. Cent.	Total. Cent.	Total. Cent.	Total. Cent.	Total. Cent.	Total. Cent.	Total. Cent.	Total. Cent.
Diagnosis of Tuberculosis confirmed ...	301 90	355 93.4	393 87	452 95	468 92	479 94	581 96	565 95	590 98.5
Suspected Tuberculosis—Retained on list for further observation ...	2 0.6	2 0.4	6 1.3	1 0.2	3 0.6	5 1	4 0.7	1 0.2	—
Altered Diagnosis ...	28 8	19 5	44 9.7	6 1.3	20 4	18 3	16 2.6	23 3.8	6 1
Diagnosis not confirmed ...	2 0.6	4 0.8	7 1.5	13 2.7	16 3	4 1	4 0.7	6 1	3 0.5

NON-PULMONARY.

	1940.	1941.	1942.	1943.	1944.	1945.	1946.	1947.	1948.
	Per	Per	Per	Per	Per	Per	Per	Per	Per
Total. Cent.	Total. Cent.	Total. Cent.	Total. Cent.	Total. Cent.	Total. Cent.	Total. Cent.	Total. Cent.	Total. Cent.	Total. Cent.
Diagnosis of Tuberculosis confirmed ...	194 81.5	233 88.6	213 87	254 94	205 79	199 87	216 88.8	202 92	198 97.53
Suspected Tuberculosis—Retained on list for further observation ...	—	2 0.76	—	—	6 2	2 0.9	—	—	—
Altered Diagnosis ...	39 16	11 4	21 8.5	7 3	43 17	15 6.5	23 9.5	13 6	5 2.47
Diagnosis not confirmed ...	5 2	17 6.5	12 4.5	8 3	6 2	13 5.6	4 1.7	5 2	—

Sputum examinations were made in 398 cases, or 66·45 per cent. of the new cases, with positive results in 239 cases and negative results in 159 cases.

No examinations of the spit was made in 201 cases, or 33·55 per cent. of the new cases, for the following reasons :—No spit, 190 ; died before or soon after notification, 7 ; left the district, 1 ; other reasons, 3.

The *housing conditions* of confirmed new cases of pulmonary tuberculosis were as follows :—

				1 Apt.	2 Apts.	3 Apts.	4 Apts.	Over 4 Apts.
Total Cases	...	...	...	56	133	206	109	61
Bed to Self	...	...	...	14	28	31	10	6
Room to Self	...	...	...	4	44	125	61	39

The number of cases confirmed for pulmonary tuberculosis was 590 ; the above table shows 565, the remaining 25 being institutional cases.

Rehousing of Affected Families.

	1940	1941	1942	1943	1944	1945	1946	1947	1948
Total No. of Applications ...	421	465	498	584	674	799	1,019	1,242	1,497
No. of Group I cases ...	236	259	282	344	413	509	672	842	1,025
No. of Group II Cases ...	87	92	97	111	128	143	171	204	253
No. of Group III cases ...	108	114	119	129	133	147	176	196	219
Total No. of houses allocated ...	207	223	241	264	284	293	333	401	562
Under Subsidy Scheme ...	48	51	51	55	59	65	97	165	326
Under Decrowding Scheme	138	151	161	180	195	198	206	206	206
Under Improvement Scheme	21	21	29	29	30	30	30	30	30
Cancellations ...	56	61	64	78	106	145	175	236	304

Cases on Record.

CASES REMOVED FROM REGISTER.									
Cases in Dis- trict at be- ginning of Year.	New Cases.	Died.	Disease Arr'ted.	Diag. Re- vised.	Left Dis- trict.	No Co- opera- tion.	Cases not yet Con- firmed.	in Dis- trict at end of Year.	Con- firmed Cases
<i>Pulmonary.</i>									
1940 ...	893	333	176	17	33	25	—	7	968
1941 ...	975	380	169	10	27	26	—	4	1,119
1942 ...	1,123	450	176	24	46	51	—	7	1,269
1943 ...	1,276	472	173	23	44	42	1	13	1,452
1944 ...	1,465	507	187	38	32	58	—	16	1,641
1945 ...	1,657	506	218	45	28	118	1	4	1,749
1946 ...	1,753	605	227	20	42	74	—	4	1,991
1947 ...	1,995	595	262	31	24	83	—	5	2,185
1948 ...	2,190	599	261	69	18	98	—	8	2,335
<i>Non-Pulmonary.</i>									
1940 ...	973	238	67	35	35	25	—	15	1,034
1941 ...	1,049	263	66	45	34	22	—	17	1,128
1942 ...	1,145	246	58	59	29	36	—	12	1,197
1943 ...	1,209	269	78	62	19	24	—	8	1,295
1944 ...	1,303	260	58	128	61	48	1	6	1,261
1945 ...	1,267	229	63	131	34	53	—	13	1,202
1946 ...	1,215	243	70	46	50	22	—	4	1,266
1947 ...	1,270	220	60	78	28	24	—	7	1,293
1948 ...	1,300	203	38	85	40	33	—	6	1,301

The following statement shows the number of contacts given to the Executive School Medical Officer ; the number of contacts returned to the Tuberculosis Officer for reasons—having left school ; case coming on to the Tuberculosis Register or recommended further investigation ; scholars having left the district ; scholars died :—

	1940	1941	1942	1943	1944	1945	1946	1947	1948
Given to E.S.M.O.	145	199	110	176	209	—	227	373	134
Returned to Tuber- culosis Officer ...	99	74	225	154	126	130	115	85	146
Left school ...	94	60	148	114	88	81	92	71	95
Coming on to Tuberculosis Register ...	2	2	7	4	3	3	4	7	6
For further investi- gation ...	1	2	10	6	3	17	6	—	3
Left district ...	1	9	58	27	25	28	12	7	38
Died ...	1	1	2	3	1	1	1	—	4

X-ray Examinations.

This type of examination has become part of the routine investigation of all cases of doubtful tuberculosis, and the extent to which facilities at the County Hospital, Motherwell; County Hospital, Cleland; County Orthopaedic Hospital, Stonehouse; and Hairmyres Colony, East Kilbride, are used by medical practitioners and the various dispensaries, etc., is shown in the following statement:—

Year.							Examinations.
1940	...	...	...	...	...	...	1,385
1941	...	...	...	...	...	...	1,908
1942	...	...	...	...	...	...	4,404
1943	...	...	...	...	...	...	5,020
1944	...	...	...	...	...	...	5,472
1945	...	...	...	...	...	...	5,999
1946	...	...	...	...	...	...	6,378
1947	...	...	...	...	...	...	6,883
1948	...	...	...	...	...	...	8,649

Table showing in detail the sources from which recommendations for X-ray examination came:—

		1940	1941	1942	1943	1944	1945	1946	1947	1948
Public Office and Medical Practitioners ...	Health and Practitioners ...	265	325	1,422	1,791	1,738	2,026	1,641	1,832	2,370
Bellshill Dispensary ...	Dispensary ...	181	250	329	441	439	675	711	811	1,005
Blantyre Institute ...	Health Institute ...	67	76	182	253	247	288	372	409	569
Cambuslang Inst.	Inst.	146	116	247	400	449	434	760	748	945
Larkhall Do.	Do.	111	124	164	236	293	291	271	384	627
Shotts Do.	Do.	126	131	155	259	285	274	378	356	448
A.P. Clinic ...	...	—	—	42	62	269	360	443	395	469
Stonehouse Out-Patient Clinic ...	Out-Patient Clinic ...	—	278	265	419	570	802	374	418	501
Uddingston Dispensary ...	Dispensary ...	54	73	99	200	229	230	238	311	403
Baillieston Dispensary ...	Dispensary ...	31	18	20	187	189	167	147	184	277
Others ...	...	404	517	1,479	772	764	452	1,043	1,035	1,035

The figure showing the number of cases X-rayed for various hospitals and sanatoria is given in their respective reports.

Treatment.

Table showing the number of cases which received treatment under the Tuberculosis Scheme in Sanatoria or other Institutions:—

				NUMBER OF PATIENTS.					In Institutions on Dec. 31.
				In Institutions on January 1.	Admitted during the year.	Discharged during the year.	* Died in the Institutions.		
				1	2	3	4	5	6
1940.									
Pulmonary	{	†Adults,	{Males,	65	117	74	22	6	80
			Females,	52	128	80	19	8	73
	{	Children,	{Males,	—	4	3	1	—	—
			Females,	5	4	2	—	—	7
Non-Pulmonary	{	†Adults,	{Males,	37	96	71	4	5	53
			Females,	30	48	44	1	6	27
	{	Children,	{Males,	34	61	48	—	6	41
			Females,	19	43	33	—	2	27
Total	...	...	...	242	501	355	47	33	308
1941.									
Pulmonary	{	†Adults,	{Males,	80	156	101	17	6	112
			Females,	73	205	129	22	12	115
	{	Children,	{Males,	—	7	1	1	—	5
			Females,	7	4	2	—	—	9
Non-Pulmonary	{	†Adults,	{Males,	53	102	102	1	5	47
			Females,	27	78	64	4	7	30
	{	Children,	{Males,	41	90	74	—	14	43
			Females,	27	67	59	—	7	28
Total	...	...	...	308	709	532	45	51	389
1942.									
Pulmonary	{	†Adults,	{Males,	112	165	127	22	7	121
			Females,	115	221	190	28	2	116
	{	Children,	{Males,	5	12	10	—	—	7
			Females,	9	9	3	1	1	13
Non-Pulmonary	{	†Adults,	{Males,	47	47	32	5	6	51
			Females,	30	57	52	1	7	27
	{	Children,	{Males,	43	48	45	—	3	43
			Females,	28	48	38	1	7	30
Total	...	...	...	389	607	497	58	33	408

				NUMBER OF PATIENTS.						
				In Insti- tutions on January 1. 1	Admitted during the year. 2	Dis- charged during the year. 3	* Died in the Insti- tutions 4	5	In Insti- tutions on Dec. 31. 6	
1943.										
Pulmonary	{	†Adults,	{ Males,	121	167	146	24	8	110	
			{ Females,	116	278	225	23	33	143	
	{	Children,	{ Males,	7	18	12	1	—	12	
			{ Females,	13	17	10	1	1	18	
Non- Pulmonary	{	†Adults,	{ Males,	51	60	59	5	9	38	
			{ Females,	27	56	46	1	9	27	
	{	Children,	{ Males,	43	76	61	1	15	42	
			{ Females,	30	62	46	2	9	35	
Total				408	734	605	58	54	425	
1944.										
Pulmonary	{	†Adults,	{ Males,	110	155	133	15	3	114	
			{ Females,	143	278	251	17	7	146	
	{	Children,	{ Males,	12	16	12	—	3	13	
			{ Females,	18	14	10	—	—	22	
Non- Pulmonary	{	†Adults,	{ Males,	38	44	46	5	6	25	
			{ Females,	27	67	60	4	7	23	
	{	Children,	{ Males,	42	59	49	1	10	41	
			{ Females,	35	54	40	1	8	40	
Total				425	687	601	43	44	424	
1945.										
Pulmonary	{	†Adults,	{ Males,	114	138	133	19	9	91	
			{ Females,	146	309	300	20	7	128	
	{	Children,	{ Males,	13	6	9	—	—	10	
			{ Females,	22	15	15	1	—	21	
Non- Pulmonary	{	†Adults,	{ Males,	25	46	43	2	6	20	
			{ Females,	23	57	52	2	5	21	
	{	Children,	{ Males,	41	59	53	—	10	37	
			{ Females,	40	46	38	—	10	38	
Total				424	676	643	44	47	366	

			NUMBER OF PATIENTS.						
			In Insti- tutions on January 1. 1.	Admitted during the year. 2	Dis- charged during the year. 3	* Died in the Insti- tutions. 4	5	In Insti- tutions on Dec. 31. 6	
1946.									
Pulmonary	{	†Adults,	{ Males, Females,	91 128	122 303	90 259	15 28	2 4	106 140
		Children,	{ Males, Females,	11 21	21 10	11 8	2 1	2 —	17 22
Non- Pulmonary	{	†Adults,	{ Males, Females,	20 21	37 39	39 34	1 2	3 4	14 20
		Children,	{ Males, Females,	37 38	32 46	26 42	1 1	9 8	33 33
Total				367	610	509	51	32	385
1947.									
Pulmonary	{	†Adults,	{ Males, Females,	106 140	98 263	75 240	22 23	6 7	101 133
		Children,	{ Males, Females,	17 22	14 9	18 22	1 3	1 1	11 5
Non- Pulmonary	{	†Adults,	{ Males, Females,	14 20	37 40	18 31	3 1	6 8	24 20
		Children,	{ Males, Females,	33 33	46 45	50 37	— —	6 11	23 30
Total				385	552	491	53	46	347
1948.									
Pulmonary	{	†Adults	{ Males, Females,	101 133	112 277	81 243	20 22	3 3	109 142
		Children,	{ Males, Females,	11 5	18 32	17 22	1 —	2 2	9 13
Non- Pulmonary	{	†Adults,	{ Males, Females,	24 20	36 40	34 29	3 —	3 6	20 25
		Children,	{ Males, Females,	23 30	36 32	26 35	1 1	7 4	25 22
Total				347	583	487	48	30	365

* In column 4 those were in final residence 28 days or over.

In column 5 those who were in final residence under 28 days.

† All patients of 15 years and upwards classed as adults.

Domiciliary Treatment.—Cases suitable for treatment at home, or who could not for some reason receive institutional treatment, were kept under observation by the Tuberculosis Officers and Nurses, the latter of whom paid visits as undernoted :—

	1940	1941	1942	1943	1944	1945	1946	1947	1948
No. of Visits	151,23	11,235	13,765	16,671	19,862	20,848	22,755	24,792	27,232

ADDITIONAL NOURISHMENT.

		No. of Cases Supplied.	Milk.	Eggs.	Meat.	Butter.
1940—						
Cases ...	...	285				
Total Cost	...	£1,448	£788	£414	£235	£10
Quantity ...	...		6,757 galls.	3,313. dozen.	—	127 lbs.
1941—						
Cases ...	...	295				
Total Cost	...	£1,417	£1,160	£31	£224	£1
Quantity ...	...		9,946 galls.	228 dozen.	—	13 lbs.
1942—						
Cases ...	...	308				
Total Cost	...	£1,972	£1,668	£6	£296	£1
Quantity ...	...		12,511 galls.	62 dozen.	—	15 lbs.
1943—						
Cases ...	...	386				
Total Cost	...	£3,404	£3,152	£2	£248	—
Quantity ...	...		23,646 galls.	28 dozen.	—	—
1944—						
Cases ...	...	776				
Total Cost	...	£4,660	£4,467	—	£193	—
Quantity ...	...		33,506 galls.	—	—	—
1945—						
Cases ...	...	1,024				
Total Cost	...	£6,984	£6,800	—	£183	—
Quantity ...	...		51,004 galls.	—	—	—
1946—						
Cases ...	...	1,241				
Total Cost	...	£9,932	£9,788	—	£144	—
Quantity ...	...		67,684 galls.	—	—	—
1947—						
Cases ...	...	1,481				
Total Cost	...	£12,507	£12,361	—	£146	—
Quantity ...	...		84,262 galls.	—	—	—
1948—						
Cases ...	...	1,774				
Total Cost	...	£16,228	£16,123	—	£105	—
Quantity ...	...		100,800 galls.	—	—	—

BED AND BEDDING.

Complete Outfits—On Loan—

					1947.	1948.
No. issued during year	...	...	...	...	17	32
No. uplifted during year	...	...	...	...	5	19
No. still on loan at end of year	...	...	...	...	20	33

Part Outfits—On Loan—

No. issued during year	...	...	...	...	9	13
No. uplifted during year	...	...	...	...	8	5
No. still on loan at end of year	...	...	...	...	24	32

					On Loan at 31/12/47.	Issued during 1948.	Uplifted during 1948.	Still on Loan, 31/12/48.
Dunlopillo	...	...	...	...	—	3	1	2
Air Bed	...	...	...	...	—	—	—	—
Air Ring	...	...	...	...	11	50	34	27
Bed-pan	...	...	...	...	5	33	23	15
Rubber Sheet	...	...	...	...	5	7	9	3
Urinal	...	...	...	...	—	1	1	—

				NEW CASES.		RE-ATTENDANCES.		
Out-Patient Clinics and Dispensaries.				Con- sultations.	Artificial Sunlight.	Con- sultations.	Dressings.	Artificial Sunlight.
Stonehouse	...	...	...	287	—	822	—	—
Bellshill	...	...	...	418	283	1,637	706	1,653
Blantyre	...	...	...	187	154	1,049	303	300
Cambuslang	...	...	...	360	73	1,378	324	332
Larkhall	...	...	...	206	97	873	472	370
Shotts	...	...	...	199	49	864	168	228
Lanark	...	...	...	25	11	315	—	66
Uddingston	...	...	...	146	—	819	—	—
Baillieston	...	...	...	94	36	522	77	143
Bishopbriggs	...	...	...	65	—	446	—	—

MEDICAL COMFORTS DISTRIBUTED.

Cases	...	...	1940	1941	1942	1943	1944	1945	1946	1947	1948
			699	784	869	887	1,126	1,200	1,241	1,320	1,419

				CHEST SURGERY CLINIC.		A.P. CLINIC.	
				1947.	1948.	1947.	1948.
New Cases	...	...	...	139	70	30	71
Total Attendances	...	...	...	165	78	1,679	2,117
Sessions	...	...	...	11	6	104	104

Rehabilitation.

The following statement shows the number of cases who were dealt with under the rehabilitation scheme.

It also shows the number of forms D.P. 1(X) completed for patients suffering from pulmonary tuberculosis registering them under the Disabled Persons (Employment) Act, 1944.

Pulmonary Tuberculosis.

No. of cases recommended	36
No. of cases who attended Clinic ...	30
No. of cases recommended for training	12
No. of cases for direct placing ...	18
Forms D.P.1(X) completed	26

Non-Pulmonary Tuberculosis.

No. of cases recommended	27
No. of cases attended	23

This statement shows in detail the number of ex-service patients from each branch of the Service, in-patient and domiciliary treatment granted, number of patients Off List and the number of cases remaining on the Register at 31st December, 1948 :—

PULMONARY.

	Royal Navy.			Merchant Navy.			
	Navy.	Army.	R.A.F.	Navy.	W.R.N.S.	A.T.S.	W.A.A.F.
On Register, 1/1/48 ...	76	143	43	8	7	9	16
New Cases, 1948 ...	8	14	12	1	1	3	—
Total Cases ...	84	157	55	9	8	12	16
Domiciliary Treatment	29	85	25	3	2	7	8
Institutional Treatment	13	56	11	4	1	5	3
Off List—							
Disease Arrested ...	1	5	1	—	—	—	1
Died ...	3	12	2	1	—	1	—
Left District ...	1	17	5	—	—	1	1
Altered Diagnosis ...	2	—	—	—	—	—	—
On Register, 31/12/48 ...	77	123	47	8	8	10	14

NON-PULMONARY.

On Register, 1/1/48 ...	4	21	4	—	1	3	—
New Cases, 1948 ...	1	1	3	—	—	—	—
Total Cases ...	5	22	7	—	1	3	—
Domiciliary Treatment	5	2	3	—	—	2	—
Institutional Treatment	2	1	1	—	—	—	—
Off List—							
Disease Arrested ...	—	2	1	—	—	—	—
Died ...	—	1	—	—	—	—	—
Left District ...	1	—	—	—	—	1	—
Altered Diagnosis ...	—	—	—	—	—	—	—
On Register, 31/12/48 ...	4	19	6	—	1	2	—

Since 1939, 401 cases have been awarded disability pensions by the Ministry of Pensions in respect of tuberculosis. 123 have been removed from the Register, leaving 278 cases—"accepted" pensioners—on the Register.

Dental Treatment.

Table showing the number of notified cases who were recommended for treatment at Out-Patient Clinics :—

Health Institute.	1940	1941	1942	1943	1944	1945	1946	1947	1948
Bellshill ...	23	16	13	12	8	25	14	19	19
Baillieston ...	3	2	4	—	2	1	6	5	4
Blantyre ...	1	2	3	2	8	4	12	8	9
Cambuslang	9	5	6	8	9	6	9	11	3
Larkhall ...	1	3	—	—	1	7	8	10	5
Shotts ...	2	3	4	—	—	1	5	13	2
	39	31	30	22	28	44	54	66	42

Supply of Dentures.—The number of recommendations made were as follows :—

	Total.	Upper and Lower.	Upper.	Lower.	Repair
1940 ...	9	8	1	—	—
1941 ...	21	14	7	—	—
1942 ...	7	3	3	1	—
1943 ...	16	8	7	1	—
1944 ...	15	9	5	1	—
1945 ...	12	8	2	2	—
1946 ...	25	22	1	2	—
1947 ...	28	15	11	2	—
1948 ...	5	3	—	—	2

Silicosis and Asbestosis (Medical Arrangements) Scheme, 1931, and Amendment Scheme, 1934.

No initial examinations in connection with the above scheme were carried out during the years.

LANARKSHIRE MASS RADIOGRAPHY UNIT.

REPORT FOR THE PERIOD FROM 1ST JANUARY, 1948, TO 4TH JULY, 1948.

The sites visited and numbers x-rayed during the above period were as follows :—

<i>Coatbridge.</i>			<i>Nos. x-rayed.</i>
British Tube Works.	January to March	...	3,255
<i>Motherwell.</i>			
Headquarters.	April to 4th July, 1948	...	5,651
Total			8,906

The following is an analysis of the total number x-rayed :—

Works Groups	...	...	...	...	3,098
General Public	...	...	...	...	433
School Children	...	...	...	...	4,796
School Teachers	...	...	...	...	23
Symptoms Group	...	...	...	...	81
Ante and Post-Natal Mothers	...	...	...	...	273
Day Nursery and San. Staffs	...	...	...	...	202
					8,906

Appended is statement showing sex and age groups of significant abnormalities detected :—

COUNTY COUNCIL OF THE COUNTY OF LANARK.

MASS RADIOGRAPHY SURVEYS.

Statement showing sex and age groups of examinees with significant abnormalities detected in total of 32,421 surveyed to 4th July, 1948, (16,046 Males, 16,375 Females).

(Excluding 1,633 subjects x-rayed at Hartwood, Hartwoodhill and Kirklands Mental Hospitals).

Significant Abnormalities.	14-19		20-24		25-34		35-44		45-54		55 Plus		Totals.		Grand Total.		Remarks.
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
Tuberculosis— Observation.	...	39	86	13	36	27	37	23	12	15	5	13	1	130	177	*307	*Previously known 38
Tuberculosis— Treatment.	...	7	24	4	24	12	10	9	3	4	—	2	—	38	61	*99	*Previously known 5.
Probably Non-Tuberculous	...	136	117	13	34	52	32	59	17	77	12	65	5	402	217	*619	*Previously known 37.
Cardiovascular	...	19	25	3	8	5	13	9	7	6	6	7	3	49	62	*111	*Previously known 44.
Totals	201	252	33	102	96	92	100	39	102	23	87	9	619	517	1,136	

The rate *per thousand* tuberculosis cases disclosed requiring treatment or observation are as follows :—

	Treatment.	Observation.
Factory and other groups	...	12.4
School Children	...	5.1
Symptoms Groups	...	36.3

63 (60.5 per cent) of the disclosed cases requiring treatment were under 25 years of age, and of these 50 were females.

MATERNITY AND CHILD WELFARE.

BIRTHS REGISTERED.—The births registered, corrected for transfers were as follows :—

	Total.	Males.	Females.	Rate per 1,000 of Estimated Population.
<i>Alive—</i>				
Legitimate ... 6,050	6,357	3,115	2,935	3,077 20·0
Illegitimate ... 307				
<i>Stillbirths—</i>	225	120	105	

BIRTHS NOTIFIED.—The number of statutory notifications received was 6,006.

The sources of notification were as follows :—

Doctors.	Midwives.	Nurses.	Parents.	Institi- tutions.	Total.
160	3,507	13	71	2,255	6,006

In addition 120 notifications were received as the result of letters addressed to parents and 12 were discovered from the returns of the local registrars, giving a gross total of 6,138. On this figure, 5,929 were live-born and 209 were stillborn.

TABLE M 1.

BIRTHS REGISTERED AND NOTIFIED.

Visits made by Nurse Health Visitors and Infantile Mortality Rates for 1948.

District Council Area	Births				Number of Visits				Attendant at Confinement				Infant Deaths							
	Registered		Stillborn		Notified		Subsequent		Doctor or with Handy- woman	Mid- wife	Handy- woman	B.B.A.	Insti- tution	Regis- tered	Rate per 1,000 Live Births					
	Legiti- mate	Illegiti- mate	Legiti- mate	Illegiti- mate	Alive	Still- born	First	Infants								Mothers	Special	Total		
No. I	...	109	6	4	—	116	4	90	933	—	44	1,067	2	19	40	—	2	27	4	34.8
No. II	...	279	15	7	1	297	9	251	3,786	135	144	4,316	3	65	108	—	—	75	10	34.0
No. III	...	406	23	20	2	434	21	371	3,990	2,039	277	6,677	2	73	148	—	1	147	18	42.0
No. IV	...	587	33	20	—	634	21	684	8,758	3,556	1,047	14,045	5	79	337	—	10	253	32	51.6
No. V	...	455	27	18	—	487	16	514	4,249	764	1,042	6,569	3	184	170	—	15	142	29	60.2
No. VI	...	1,210	47	47	—	1,254	47	1,445	13,171	1,850	3,021	19,487	13	130	567	2	19	714	72	57.3
No. VII	...	761	41	25	2	808	28	871	8,221	955	1,410	11,457	1	232	355	—	1	282	44	54.9
No. VIII	...	532	12	21	2	543	23	644	6,814	2,019	1,706	11,183	1	72	229	—	—	342	25	31.2
No. IX	...	1,151	42	33	—	1,216	34	1,399	11,944	999	3,965	18,307	18	237	540	—	19	585	65	54.5
Biggar Burgh	...	26	2	3	—	28	1	29	374	—	1	404	—	5	10	—	1	13	1	35.7
Lanark Burgh	...	102	4	5	2	112	5	98	611	9	225	943	—	57	—	—	1	40	4	37.7

Calculated on corrected live births and corrected infant deaths registered, 49.8

Corrected live births registered, 6,357

Corrected stillbirths registered, 225

Corrected infant deaths, 317

*6,082

*Not corrected for transfers.

6,138

ATTENDANCE AT CONFINEMENT.—Particulars connected with 6,218 *live* infants have been recorded. Of this number it has been found that 38 (0·6%) were attended by medical practitioners alone or assisted by neighbours or relatives; 1,115 (17·9%) by doctors assisted by certified midwives; 2,473 (39·8%) by certified midwives; 2 (0·03%) by women not on the Midwives Roll; 2,525 (40·6%) occurred in institutions; and in the case of 65 (1·04%) the births took place before the arrival of an attendant.

STILLBIRTHS.—The total number of stillbirths was 209 and the health visitor enquired into 178 of these. The attendance at confinement was as follows :—Doctor alone or with an unqualified woman 10 (5·6%); doctor and midwife 38 (21·3%); midwife 31 (17·4%); 4 (2·2%) were born before the arrival of an attendant; institution cases 95 (53·4%).

The classification of the attendants at birth (including stillbirths) is as follows :—

Cases attended by midwives	39·1%
Cases attended by doctors and midwives	18·0%
Cases attended by doctors assisted by neighbours or relatives	·8%
Cases attended by handywomen	·03%
Cases attended by institutions	41·0%
B.B.A.	1·1%

INFANTILE MORTALITY.

The deaths of infants under 1 year corrected for transfer numbered 317 and calculated on the live births corrected for transfer the rate is 49·8 per 1,000. The infantile mortality rate for each of the District Council Areas is set forth in Table M.I.

Table M. II. shows the deaths arranged according to group-causes and age-periods :—

TABLE M II
AGE PERIODS.

Cause of Death.	Weeks.	Total.			Months.	Total			Rate per 1,000 live births.
		1-2	2-3	3-4		1-3	6-9	9-12	
	-1	1-2	2-3	3-4	-4	live births.	live births.	live births.	
1. Prematurity ...	70	8	6	1	85	14.5	1	—	15.7
Congenital Hydrocephalus ...	—	—	—	—	—	—	—	—	—
Congenital Malformation ...	8	—	2	1	11	1.9	1	2	3.6
Congenital Heart ...	3	—	—	1	4	0.7	—	—	0.7
Atelectasis ...	13	—	—	2	15	2.6	—	—	2.6
Injury at Birth ...	12	—	—	—	12	2.0	—	—	2.0
2. Atrophy, Debility and Marasmus ...	4	—	—	—	4	0.7	1	1	2.0
3. Diarrhoea ...	1	4	3	5	13	2.2	5	2	3.8
4. Pneumonia ...	4	—	1	—	5	0.9	16	3	7.8
Bronchitis ...	—	—	—	—	—	—	1	2	0.9
Other respiratory Diseases ...	1	—	1	1	3	0.5	1	1	1.0
Influenza ...	—	—	—	—	—	—	1	—	0.2
5. Tuberculosis—	—	—	—	—	—	—	—	—	—
Pulmonary ...	—	—	—	—	—	—	—	3	0.5
Meningeal ...	—	—	—	—	—	—	—	—	—
Abdominal ...	—	—	—	—	—	—	—	—	—
Other ...	—	—	—	—	—	—	—	—	—
6. Convulsions ...	2	—	—	—	2	0.3	—	—	—
Meningitis ...	—	—	—	—	—	—	1	—	1.4
Cerebro-spinal fever ...	—	—	—	—	—	—	1	—	0.5
7. Measles ...	—	—	—	—	—	—	1	—	0.2
Diphtheria ...	—	—	—	—	—	—	1	—	0.3
Whooping Cough ...	—	—	—	—	—	—	1	—	—
Erysipelas ...	—	—	—	—	—	—	—	—	—
8. Syphilis ...	—	—	—	—	—	—	1	—	0.2
9. Other causes ...	10	—	2	1	13	2.2	3	3	5.3
Rate per 1,000 live births registered not corrected for transfer	128	12	15	12	167	28.4	34	13	51.8
Rate per 1,000 live births registered corrected for transfer	21.8	2.0	2.6	2.0	28.4	—	5.8	2.2	51.8
Rate per 1,000 live births registered corrected for transfer	20.1	1.9	2.4	1.9	26.3	—	5.3	2.0	40.8

INFANTILE MORTALITY RATE.

The death rate of infants under 1 year at various periods since 1891 is shown in the following table :—

					County of Lanark.	Scotland.
1891-1895	...	...	...	...	124.1	126.3
1911-1915	...	...	...	...	112.0	112.9
1931-1935	...	...	...	...	80.5	80.7
1936	...	...	...	...	86.9	82.3
1937	...	...	...	...	70.9	80.3
1938	...	...	...	...	68.8	70.0
1939	...	...	...	...	73.8	68.5
1940	...	...	...	...	82.4	78.0
1941	...	...	...	...	83.8	83.0
1942	...	...	...	...	68.8	69.3
1943	...	...	...	...	67.2	65.0
1944	...	...	...	...	65.1	65.0
1945	...	...	...	...	57.1	56.2
1946	...	...	...	...	53.8	53.8
1947	...	...	...	...	50.5	55.8
1948	...	...	...	...	49.8	44.7

MATERNAL MORTALITY RATE.

The maternal deaths during the year numbered 11, equal to a rate of 1.67 for 1,000 births. The maternal mortality rates arranged in quinquennial periods from 1910 to 1939 are as follows :—

					County of Lanark.	Scotland.
1910-1914	...	...	...	...	4.93	5.8
1915-1919	...	...	...	...	4.61	6.1
1920-1924	...	...	...	...	6.83	6.3
1925-1929	...	...	...	...	5.82	6.6
1930-1934	...	...	...	...	6.28	6.2
1935-1939	...	...	...	...	4.34	5.2
1940	...	...	...	...	4.66	4.2
1941	...	...	...	...	5.99	4.7
1942	...	...	...	...	6.07	4.0
1943	...	...	...	...	3.17	3.7
1944	...	...	...	...	3.12	3.1
1945	...	...	...	...	2.65	2.8
1946	...	...	...	...	2.23	2.2
1947	...	...	...	...	2.02	2.0
1948	...	...	...	...	1.67	1.5

Table M III gives the attendances of mothers, infants and children at the Child Welfare Centres.

TABLE M III.

Centres.			No. of Sessions.	Mothers.	Total Attendances.	
					Children.	
					Under 1 year	Over 1 year.
Airdrie ...	...	...	23	713	205	274
Baillieston	...	...	46	3,774	1,201	648
Bellshill ...	...	...	49	3,028	1,542	1,501
Bishopbriggs	...	...	49	1,920	1,596	548
Blantyre	...	...	49	2,305	1,504	587
Cadzow ...	...	...	49	1,849	1,105	659
Cambuslang	...	...	49	1,430	350	977
Carlisle ...	...	...	23	913	751	223
Chapelhall	...	...	22	480	142	142
Chryston	...	...	49	1,521	332	543
Lanark ...	...	...	48	2,398	1,814	829
Larkhall	...	...	46	3,717	2,300	850
Lesmahagow	...	...	49	1,615	1,287	558
Newarthill	...	...	49	2,033	1,641	650
Newmains	...	...	49	2,574	1,264	1,191
New Stevenston	...	...	49	1,528	425	502
Shotts ...	...	...	48	3,664	1,839	1,764
Strathaven	...	...	23	888	434	252
Tannochside	...	...	46	1,448	556	663
Uddingston	...	...	48	2,109	994	953
			863	39,907	21,282	14,314

Table M IV. gives the attendance of mothers, infants and children at the Auxiliary Child Welfare Centres.

TABLE M IV.

Centre.				No. of Sessions.	Mothers.	Total Attendances.	
						Children.	
					Under 1 year.	Over 1 year.	
Auchinloch	...	...	24	227	155	103
Biggar	...	...	21	429	372	57
Bankhead	...	...	21	287	284	89
Blackwood	...	...	23	204	173	54
Bothwellhaugh	...	...	22	125	116	26
Busby	...	...	—	—	—	—
Calderbank	...	...	23	494	492	69
Carmyle	...	...	23	506	506	86
Carstairs	...	...	23	290	262	34
Cleland	...	...	23	338	223	20
Coalburn	...	...	22	186	142	40
Douglas	...	...	21	237	229	8
Douglas Water	...	...	22	333	328	83
East Kilbride	...	...	22	366	224	111
Forth	...	...	17	64	64	—
Glenboig	...	...	25	34	188	35
Harthill	...	...	23	654	642	26
Law	...	...	23	513	498	15
Newton	...	...	19	103	146	38
Overtown	...	...	22	758	728	15
Salsburgh	...	...	23	487	483	27
Shettleston	...	...	22	284	301	73
Stonehouse	...	...	22	461	448	25
				486	7,380	7,004	
						1,034	

Table M V. shows the number of sessions held and the number of First Visits and Re-Visits made by Mothers, Infants and Children.

TABLE M V.

MEDICAL CONSULTATIONS.

Centres.	Mothers.						Children.			
	No. of First Sessions.	Ante-natal.		Post-natal and others.		First Visit.	Under 1 year.		Over 1 year.	
		Visit.	Total.	First Visit.	Total.		First Visit.	Total.	First Visit.	Total.
Airdrie ...	23	7	7	26	88	76	209	56	214	
Baillieston ...	46	2	2	72	123	192	417	144	324	
Bellshill ...	49	9	11	155	443	235	434	230	557	
Bishopbriggs ...	49	30	42	46	132	78	249	73	208	
Blantyre ...	49	4	5	87	256	165	419	187	437	
Cambuslang ...	49	3	3	65	103	173	296	205	399	
Cadzow ...	49	5	8	37	90	87	248	95	318	
Carlisle ...	23	2	3	18	66	67	193	43	160	
Chapelhall ...	22	3	3	32	91	50	141	44	104	
Chryston ...	50	18	29	72	215	97	300	105	405	
Lanark ...	48	—	3	48	172	136	607	94	492	
Larkhall ...	45	4	6	66	265	110	316	121	371	
Lesmahagow ...	48	—	—	41	118	72	147	62	134	
Newarthill ...	49	15	20	57	205	127	311	102	270	
Newmains ...	49	5	8	52	105	124	294	106	206	
New Stevenston ...	49	27	54	114	338	176	404	149	411	
Shotts ...	48	2	2	34	59	156	293	118	217	
Strathaven ...	23	1	1	19	61	44	135	64	152	
Tannochside ...	46	6	10	87	192	131	320	92	212	
Uddingston ...	48	7	7	80	144	157	314	135	362	
	862	150	224	1,208	3,266	2,453	6,047	2,225	5,953	

TREATMENT OF SQUINT.

The work in connection with the treatment of squint cases is summarised in the following statement :—

Cases examined at.				First Cases.	Spectacles Prescribed.	Re-examined.
Baillieston	...	...	...	22	17	88
Bellshill	...	...	...	82	87	331
Blantyre	...	...	...	27	26	55
Cambuslang	...	...	...	32	14	105
Larkhall	...	...	...	25	25	61
Shotts	...	...	...	9	14	41
				197	183	681

DENTAL TREATMENT—MOTHERS AND CHILDREN.

During the year 458 mothers and 89 children were recommended for treatment and of these 385 mothers and 31 children attended the Dental Surgeons.

Centre.	MOTHERS.		CHILDREN.	
	Recommended. for Treatment.	Attended Dentist.	Recommended. for Treatment.	Attended Dentist.
Airdrie	29	24	3	2
Baillieston	4	4	—	—
Bellshill	39	31	15	7
Bishopbriggs	4	2	3	2
Blantyre	28	27	6	1
Cadzow	18	14	4	3
Cambuslang	47	46	6	3
Carluke	23	20	10	3
Chapelhall	6	3	1	—
Chryston	8	5	3	—
Douglas	—	—	—	—
Lanark	4	3	4	—
Larkhall	58	53	1	—
Lesmahagow	11	8	1	—
Newarthill	18	9	10	3
Newmains	33	29	4	1
New Stevenston	17	12	6	4
Shotts	48	42	7	1
Strathaven	6	6	—	—
Tannochside	28	23	2	1
Uddingston	29	24	3	—
	458	385	89	31

PÆDIATRIC CLINIC.

During the year 159 children were seen for the first time and the re-attendances numbered 256, giving a total of 415 attendances.

The Paediatrician who is in charge of the children's cots at Cleland Hospital is also available for consultation as required at all the Local Authority hospitals.

EAR, NOSE AND THROAT AILMENTS.

No of Sessions.	No. of 1st Visits.	No. of Re-visits	Operations Recommended.	Operations Performed.
23	340	102	269	158

PROVISION OF SURGICAL APPLIANCES.

There were no surgical appliances provided.

ISSUE OF COUPON EQUIVALENT CERTIFICATES FOR BED SHEETS.

In terms of D.H.S. Circular No. 161/1944, 3,500 Certificates for Double Sheets (6 Coupon Value) and 1,718 Certificates for Double Sheets (4 Coupon Value, new Issue), total of 5,218 ,were issued to expectant mothers to be confined in their own homes to enable them to purchase bed sheets.

MEDICAL COMFORTS.

STATEMENT showing quantity and cost of Medical Comforts supplied under the Maternity and Child Welfare Scheme to Expectant and Nursing Mothers and Children under five years of age, during the year ended 31st December, 1948.

	Mothers.	Children.
No. of persons supplied with Medical Comforts	197	1,342
<i>Medical Comforts—</i>		
Virol	3,424 lbs. 8 ozs.	
Virolax	941 lbs.	
Malt and Oil	246 lbs.	
Maltoline with Iron	1,368 lbs.	
Maltoline	1,098 lbs. 8 ozs.	
Cod Liver Oil Emulsion	26 galls 40 ozs.	
Cod Liver Oil	104 ozs.	
Glucose D	93 lbs.	
Salad Oil	2 galls 73 ozs.	
Robinson's Groats	14 tins	
Adexolin	1,724 bottles	
Allergilac	4 tins	
Total cost to Local Authority	£807 14 0	
Amount recovered by Local Authority	232 16 0	
Net Cost	£574 18 0	

On 1st July, 1940, the Ministry of Food introduced a Scheme for the provision of milk to expectant and nursing mothers and children under 5 years of age. The Public Health Department is co-operating in the distribution of the National Dried Milk through the local Child Welfare Centres.

DAY NURSERIES.

Nursery.			Date. Opened.	Average No. on Roll.	Average Daily Attendances.	Total Attendances
Bellshill	...	...	5/10/42	41.0	32.9	8,216
Cambuslang	...	...	12/10/42	24.9	29.8	7,444
Baillieston	...	...	1/3/43	42.0	30.6	7,692
Blantyre	...	...	19/4/43	41.4	31.5	7,874
Larkhall	...	...	17/5/43	42.5	32.2	7,035
Newmains	...	...	1/11/43	35.4	26.8	6,587

MEALS SUPPLIED TO MOTHERS AND CHILDREN.

		Total Attendances.		Average Daily Attendances.	
		Mothers.	Children.	Mothers.	Children.
Cambuslang	...	2,359	1,542	6.3	4.2
commenced	27/3/44				
Bellshill	...	3,938	3,301	10.7	9.0
commenced	31/7/44				
Blantyre	...	2,209	1,461	6.0	4.0
commenced	4/9/44				
Baillieston	...	2,681	2,091	7.3	5.7
commenced	2/10/44				
Larkhall	...	2,581	866	7.0	2.3
commenced	2/10/44				
Chryston	...	1,748	3,001	4.7	8.2
commenced	7/5/45				
Shotts	...				
commenced	2/10/44				
ceased	15/6/46				

CHILDREN AND YOUNG PERSONS (SCOTLAND) ACT, 1937.

In the following paragraph the statutory notices received throughout the year are recorded :—

Children on Infant Protection Register at 31st December, 1947	...	...	...	...	39
Notices received in terms of Section 1 (1) of the Act	...	...	...	...	36
Notices received from guardians on removal to the area of the Council from the area of another Authority	...	...	...	...	—
					<hr/> 75 <hr/>
Notices received under Section 1 (5) of the Act :—					
Of deaths of children	...	...	...	...	1
Of removals of children	...	...	...	...	2
Removals under Section 5 of the Act of children improperly kept	...	...	...	...	—
Children otherwise removed from the Register :—					
(a) On attaining the age of 9 years	...	...	...	...	—
(b) On guardian's removal from area of Council	...	...	...	...	1
(c) For other reasons	...	...	...	...	*28
Children on Register at 31st December, 1948	...	...	...	...	43
					<hr/> 75 <hr/>

* Legally adopted 24 ; returned to mother 4.

ADOPTION OF CHILDREN (REGULATION) ACT, 1939.

Children on Register at 31st December, 1947	...	...	...	18
Notices received under Section 7 (3) of the Act	...	...	...	9
				<hr/> 27 <hr/>
Notices received under Section 7 (5) of the Act :—				
Of deaths of children	...	...	...	—
Of removals of children	...	...	...	—
Removals under Section 7 (6) of the Act of children improperly kept	...	...	...	—
Children otherwise removed from the Register :—				
(a) On attaining the age of 9 years	...	...	...	—
(b) On making of Adoption Order	...	...	...	20
(c) On adopters' removal from area of Council	...	...	...	1
(d) For other reasons	...	...	...	—
Children on Register at 31st December, 1948	...	...	...	6
				<hr/> 27 <hr/>

Throughout the year 262 visits were made by the Infant Protection Visitors. The reports indicated that all the children have received good homes and are well cared for.

DISTRICT NURSING ASSOCIATIONS.

A list of the District Nursing Associations engaged in the Maternity and Child Welfare work is given in the following statement which also gives the number of visits for the year.

					First Visits.	Re-visits.	Total Visits.
Biggar	...	...	...	...	54	778	832
Caldercruix	...	...	...	...	37	549	586
Carmichael-Anstruther	...	...	...	...	10	165	175
Carnwath	...	...	...	...	33	383	416
Clydeside	...	...	...	...	26	606	632
Crawford	...	...	...	...	6	143	149
Douglas	....	...	...	...	68	1,158	1,226
Forth	...	...	...	...	49	762	811
Glassford	...	...	...	...	21	259	280
Glenboig	...	...	...	...	60	875	935
Leadhills	...	...	...	...	3	62	65
Lesmahagow	...	...	...	...	38	567	605
Quarter	...	...	...	...	11	291	302
Stonehouse	...	...	...	...	57	1,177	1,234
West Linton	...	...	...	...	1	47	48

DOMESTIC HELP SCHEME.

Panel of Domestic Helps.—There was a panel of one full-time and 332 approved part-time Domestic Helps available for service throughout the County at the close of the year.

The following statement shows the number of cases dealt with, the amounts paid by the applicants and the sums recovered by the Local Authority.

No. of Cases.	No. of days in Attendance.	Paid by Patient.		Paid by Local Authority.	
		£	s. d.	£	s. d.
3	1	0	8 2	1	3 4
1	2	0	9 6	0	14 6
6	3	3	18 9	18	11 3
2	4	0	5 11	3	4 7
1	5	0	15 11	1	14 7
8	6	8	11 6	18	13 0
19	7	20	0 6	52	7 11
4	8	6	0 4	11	3 7
3	9	2	14 1	10	9 11
24	10	39	18 9	88	18 3
5	11	9	3 7	19	13 11
11	12	17	3 1	53	9 0
15	13	25	14 1	82	15 8
458	14	1,052	19 8	2,679	8 9
6	15	15	16 7	27	17 11
6	17	12	16 6	40	19 6
4	18	9	16 10	25	15 2
3	19	3	5 3	26	11 10
3	20	11	10 7	21	9 5
34	21	121	18 11	291	8 10
1	22	0	7 2	4	4 10
2	23	15	5 8	5	18 4
1	24	6	8 10	6	3 2
2	25	6	15 2	21	7 4
2	26	1	17 9	30	6 3
7	27	20	7 10	87	18 8
72	28	305	0 7	864	14 3
C/F 703		1,719	11 6	4,497	3 9

No. of Cases.	No. of days in Attendance.	Paid by Patient.	Paid by Local Authority.
		£ s. d.	£ s. d.
B/F 703		1,719 11 6	4,497 3 9
2	29	0 11 6	16 16 6
3	31	5 7 3	50 8 9
1	32	4 2 6	13 1 6
9	35	41 17 1	110 7 11
1	36	0 9 5	21 2 7
2	37	7 8 7	26 19 11
2	39	12 11 3	64 10 9
5	40	11 17 6	99 13 0
4	41	5 15 4	61 15 2
22	42	123 3 7	357 9 11
2	44	0 0 0	44 10 3
1	46	1 2 8	23 6 4
1	47	0 18 3	20 4 9
4	49	16 7 2	73 10 4
2	51	2 13 10	51 11 2
2	52	4 8 4	42 0 2
4	54	22 9 10	106 9 8
16	56	113 15 6	371 16 6
1	60	15 7 10	17 12 2
4	63	25 10 2	101 8 1
1	65	11 6 0	27 14 0
2	67	41 16 2	38 7 4
2	68	9 11 10	32 4 4
2	69	31 15 9	66 7 6
6	70	39 19 3	178 15 1
1	73	0 0 0	75 9 9
2	75	3 8 4	82 4 2
1	77	10 2 7	36 1 5
1	78	5 1 3	41 14 9
1	79	0 0 0	47 8 0
2	80	11 9 9	84 16 3
1	81	0 5 3	11 8 9
2	83	4 3 0	88 17 0
3	84	26 1 6	166 12 6
C/F 818		2,330 9 9	7,150 0 0

No. of Cases.	No. of days in Attendance.	Paid by Patient.	Paid by Local Authority.
		£ s. d.	£ s. d.
B/F 818		2,330 9 9	7,150 0 0
1	88	16 14 8	29 9 4
2	90	14 16 6	90 6 6
2	91	34 17 0	50 7 0
1	92	1 16 1	39 11 11
1	96	9 10 6	48 1 6
2	98	41 2 0	14 10 0
1	102	20 9 8	46 14 4
1	103	18 9 0	38 3 0
1	105	7 4 0	55 16 0
1	106	0 18 7	38 1 5
1	107	2 15 6	21 6 0
1	111	2 18 2	63 13 10
2	112	26 15 4	107 12 8
2	119	6 17 3	100 4 9
1	126	7 19 0	67 13 0
1	128	16 6 7	65 1 5
1	130	0 6 3	89 13 9
1	154	34 15 8	26 18 10
1	156	0 0 0	75 4 6
1	161	33 19 11	62 12 1
1	166	32 4 3	68 1 9
1	168	3 9 0	96 3 0
2	175	36 15 0	114 13 0
1	194	16 18 5	98 18 7
1	206	3 17 11	96 6 1
2	211	46 17 4	206 6 8
1	238	0 0 0	94 19 0
1	259	4 16 10	150 8 2
1	308	57 2 5	115 13 10
1	358	39 7 6	175 5 6
855		£2,870 10 1	£9,497 17 5

In addition to the above payments received from applicants the County Treasurer recovered the sum of £4 14s. 6d.

PROVISION OF DOMESTIC HELP TO TUBERCULOSIS
HOUSEHOLDS.

The provision of domestic help for tuberculosis households was made available from 22/8/48. A certificate is granted by the Tuberculosis Officer in every case where assistance in these homes is required. 14 specially selected women over the age of 45 years and who had been regarded, after medical examination, as suitable for this type of employment were engaged in 18 instances, as shown in the following table :—

No. of Cases.	No. of days in Attendance.	Paid by Patient.			Paid by Local Authority.		
		£	s.	d.	£	s.	d.
1	6	0	2	8	1	13	4
1	12	0	6	4	6	17	8
2	13	2	18	3	8	15	9
2	14	2	15	8	22	8	4
1	23	1	6	5	12	9	7
2	29	4	15	0	20	12	0
1	37	3	3	7	16	0	5
1	42	0	0	0	12	12	0
1	44	0	0	0	13	10	0
1	60	3	0	9	32	19	0
1	62	1	9	0	35	15	0
1	66	11	18	10	7	7	2
1	71	2	5	8	40	6	8
1	76	3	0	0	30	19	6
1	77	4	10	2	40	1	10
18		£41	12	4	£302	8	6

NANNIE SCHEME.

No. of Cases.	No. of days in Attendance.	Amounts paid by Mothers.		
		£	s.	d.
1	1	0	1	0
2	2	0	2	8
2	5	0	9	2
2	6	0	9	6
1	7	0	9	4
3	8	1	1	4
1	9	0	6	0
1	10	0	18	4
2	11	1	1	1
2	12	1	2	0
5	13	3	14	9
6	14	4	9	4
1	15	0	0	0
4	17	3	7	8
4	18	4	10	9
1	20	1	0	0
2	21	1	6	3
5	22	7	8	6
1	23	0	13	8
1	24	1	6	0
1	25	0	18	9
1	26	0	0	0
2	28	3	0	8
1	29	3	12	6
2	31	2	1	4
1	33	1	18	6
1	34	0	0	0
2	36	2	11	6
1	37	1	1	7
1	38	3	2	0
1	39	1	12	6
1	40	1	10	0
2	41	4	2	0
1	46	4	15	10
2	48	5	4	0
2	49	7	2	3
1	51	4	7	8
1	53	0	13	3
1	54	5	3	6
1	71	4	2	10
1	72	3	0	0
1	73	3	13	0
1	30	3	2	6
76		100	13	6

MIDWIVES AND MATERNITY HOMES (SCOTLAND) ACTS,
1915 AND 1927.

Practising Midwives.—During the year 127 midwives (98 resident within and 29 resident outwith the County) notified their intention to practise. A list of these midwives was forwarded to the Central Midwives Board on 4th February, 1949.

The qualifications of the practising midwives are as follows :—

Certificate of the Central Midwives Board (Scotland)	120
Certificate of the Central Midwives Board (England)	4
Trained and certified by the Royal Maternity Hospital (Glasgow)	1
In <i>bona fide</i> practice and certified under the Act ...	2
	127

The above indicates that 125 (98·4%) of the midwives are trained and 2 (1·6%) untrained.

The distribution of the practising midwives according to the District Council Areas is as follows :—

District Council Area.				District Council Area.			
Number of Midwives.				Number of Midwives.			
No. I	...	...	4	No. VII	...	...	12
No. II	...	...	4	No. VIII	...	...	6
No. III	...	...	11	No. IX	...	...	17
No. IV	...	...	12	Lanark Burgh	...	...	2
No. V	...	...	7	Biggar Burgh	...	...	2
No. VI	...	...	21	Resident outwith County	...	...	29
							127

Change of Address.—The changes of address of 7 midwives were notified to the Board.

Inspection of Midwives.—The routine inspection of midwives resident in the County numbered 218. In addition 177 special inspections were made.

Attendance at Confinement.—The number of births notified as having been attended by certified midwives was 2,716, which represents 44·2 per cent. of the total births.

Attendance by Unqualified Persons.—In 2 instances an unqualified person conducted the confinement. In each case the attendance had been given in emergency and no further action was taken.

Infantile Deaths.—The total number of infantile deaths was 304. In 140 cases the deaths occurred in infants during the first 14 days, 26 of these occurred in domiciliary cases under the Maternity Services Scheme, 28 under the Domiciliary Midwifery Service, and 81 cases attended by midwives in institutions, and 5 other domiciliary cases attended by midwives. The causes of death were as follows:—premature births, 79; injury at birth, 11; atelectasis, 13; malformation, 9; atrophy, 4; pneumonia, 4; congenital heart, 3; diarrhoea, 5; convulsion, 3; other causes, 7; other respiratory, 2.

Ophthalmia Neonatorum and Discharging Eyes.—The total number of cases was 108; 42 of these occurred in domiciliary cases under the Maternity Services Scheme, 30 under the Domiciliary Midwifery Service; 33 among cases attended by midwives in institutions; and 3 other domiciliary cases attended by midwives.

Puerperal Fever and Pyrexia.—The total number of cases notified was 34 and 10 occurred among domiciliary cases under the Maternity Services Scheme, 8 under the Domiciliary Midwifery Service; 12 among cases attended by midwives in institutions; and 4 other domiciliary cases attended by midwives.

Stillbirths.—The total number of stillbirths was 209, 48 of these in domiciliary cases under the Maternity Services Scheme, 39 under the Domiciliary Midwifery Service, 112 among cases attended by midwives in institutions and 9 other domiciliary cases attended by midwives: 1 no information.

Liability to be a source of Infection.—4 notifications were received from midwives as follows:—pelvic cellulitis, 1; dermatitis of hand, 1; puerperal pyrexia, 1; pneumonia, 1.

Form of having laid out a Dead Body.—1.

Form of Notification of Artificial Feeding.—119.

Form of Notification of Death.—3.

Form of Notification of Inadequate Accommodation.—2.

Notification of Patient's Failure to follow advice.—Nil.

Medical Assistance.—Medical aid was sought by 7 midwives in 10 instances representing 0·4 per cent. of the births attended by certified midwives.

Maternity Services (Scotland) Act, 1937.

National Health Service (Scotland) Act, 1947.

During the year, attendance at domiciliary confinements was provided under the Maternity Services Scheme from 1st January to 4th July, after which date the Domiciliary Midwifery Scheme under the National Health Service (Scotland) Act, 1947, become operative.

In the latter scheme "it shall be the duty of the Local Health Authority to make adequate arrangements for the provision to women . . . of the services in their homes of certified midwives." Hitherto the attendance of a medical practitioner was arranged through the Maternity Services Scheme but this is not now the responsibility of the Local Authority. Patients are no longer required to contribute to the cost of the service.

The total number of domiciliary confinements during the year was 3,883, and of these, 3,837 or 98·8 per cent. were dealt with under the schemes as follows :—

1,991 cases under the Maternity Services (Scotland) Act, 1937, during the period from 1st January to 4th July, 1948. This figure includes 35 abortions and 110 cases subsequently removed to hospital.

1,846 cases under the National Health Service (Scotland) Act, 1947, during the period 5th July to 31st December, 1948. This figure indicates 34 abortions and 112 cases subsequently removed to hospital.

Maternity Services (Scotland) Act, 1937.

Charges to booked patients who were confined during the period from 1/1/48 to 4/7/48. The charges to patients were in general terms thus :—

- (a) Persons whose incomes are under £5 per week ... 30s.
- (b) Persons whose incomes are from £5 to £6 per week ... 50s.
- (c) Persons whose incomes are over £6 per week ... 65s.
- (d) Persons unable to pay standard charges may have a modification according to their circumstances grading down to Nil.

27·2 per cent. agreed to pay the full charge of 65s. ; 29·8 per cent., 50s.; 34·7 per cent., 30s.; and 5·7 per cent. a modified fee. In 2·6 per cent. of the cases no charge was made.

Attendance of Individual Midwives.—The average number of cases attended by the midwives was as follows :—

	Total Cases.	Average per Midwife.
Full-time Midwives	349	29·08
Part-time Midwives	1,141	40·75
District Nursing Associations ...	501	17·89

The following table arranged in groups indicates the number of cases attended by the midwives :—

No. of Midwives.	No. of Cases.					
	0	25	50	75	100	125
	to 25	to 50	to 75	to 100	to 125	to 150
12 full-time midwives	6	5	1	—	—	—
28 part-time midwives	9	10	6	3	—	—
28 district nursing associations ...	21	6	1	—	—	—

Fees paid to Doctors and Midwives.—The accounts transmitted for payment during the period from 1/1/48 to 4/7/48 were as follows :—

	Fee.			Mileage.			Total.		
	£	s.	d.	£	s.	d.	£	s.	d.
Doctors	9,800	3	1	259	7	7	10,059	10	8
Midwives	8,406	15	10	273	0	2	8,679	16	0
Anaesthetists	21	0	0	0	0	0	21	0	0
Consultants	319	4	0	82	0	0	401	4	0
	£18,547	2	11	£614	7	9	£19,161	10	8

Receipts from Patients.—The sum of £5,518 8s. 7d., was received in respect of services rendered and this amount was transmitted to the County Treasurer. In 441 cases the patients failed to make payment in the regular way, the total amount involved being £768 11s. 2d. The amount collected by the County Treasurer was £399 12s. 2d. and this sum is included in the total of £5,518 8s. 7d.

CONSULTATIONS.

The services of the Panel of Obstetricians were requested in 35 instances on account of the following conditions :—

Post-partum Haemorrhage ...	7	Vertex Presentation ...	1
Disproportion and High Blood Pressure ...	1	Incomplete Abortion and Severe Shock ...	1
Retained Placenta ...	3	Threatened Abortion, Prolapsed Uterus ...	1
High Blood Pressure ...	2	Obstetric Shock ...	1
Delayed Labour ...	3	Abdominal Pains in the Puerperium ...	1
Breech Presentation ...	5	Placenta Praevia ...	1
Occipito-posterior Position ...	1	? Twins and Hydramnios ...	1
Post-partum Haemorrhage and Retained Placenta ...	4	? Twin Pregnancy ...	2

National Health Service (Scotland) Act, 1947.

The number of booked cases during the period from 5/7/48 to 31/12/48 was 2,773.

Fees paid to Midwives :—

	Fee.	Mileage.	Total.
	£ s. d.	£ s. d.	£ s. d.
Midwives ...	2,355 18 7	64 14 11	2,420 13 6

Attendance of Individual Midwives.—The average number of cases attended by the midwives was as follows :—

	Total Cases.	Average per Midwife.
Full-time Midwives ...	517	32·31
Part-time Midwives ...	837	44·05
District Nursing Associations ...	492	16·96

The following table arranged in groups indicates the number of cases attended by the midwives :—

No. of Midwives.	No. of Cases.					
	0 to 25	25 to 50	50 to 75	75 to 100	100 to 125	125 to 150
	25	50	75	100	125	150
16 Full-time Midwives ...	5	9	2	—	—	—
19 Part-time Midwives ...	3	8	8	—	—	—
29 District Nursing Associations ...	22	7	—	—	—	—

D.H. Circular 146/1948

Addendum.

STATISTICS RELATING TO LOCAL HEALTH AUTHORITY SERVICES.

1. *Care of mothers and young children.*

(a) *Ante-natal and post-natal clinics** (whether provided at child welfare centres or at other premises) :—

	Ante-natal	Post-natal
(i) Number of clinics at end of year provided by local health authority	7	7
(ii) Number of clinics at end of year provided by voluntary bodies	—	—
(iii) Total number of women who attended at the clinics during year	2,414	1,445

(b) *Child welfare clinics** :—

	†Auxiliary Clinics.
(i) Number of clinics at end of year provided by local health authority—20	23
(ii) Number of clinics at end of year provided by voluntary bodies—Nil	—
(iii) Total number of children under 5 years of age who first attended at the clinics during the year and who, on the date of their first attendance, were :—	
(a) under 1 year of age—2,894	699
(b) over 1 year of age—2,606	88
(iv) Total number of attendances during the year made at the clinics by children who, at the end of the year, were :—	
(a) under 1 year of age—21,282	7,004
(b) over 1 year of age—14,314	1,034

* "Clinics" means clinic premises, not sessions.

† No medical officer attends.

(c) *Dental care* :—

	Expectant mothers.	Nursing mothers.	Pre-school children.
(i) Number inspected by dental officer	426	32	89
(ii) Number found to require treatment	424	17	33
(iii) Number accepting treatment	424	17	33
(iv) Number actually treated by dental officers	368	17	31

(d) *Mother and baby homes :—*

Name and Address of Home or Hostel.	No. of beds.			Average length of stay.		
	Ante-natal.	Post-natal.	Total ante- and post-natal.	length of stay.		Ante- Cots.
				Ante-natal.	†Post-natal.	
(1)	(2)	(3)	(4)	(5)	(6)	(7)
(i) Provided by local authority— County Hospital, Lanark (now Regional Hospital Board)	2	14	16	20	11 days.	12 days.
(ii) Provided by voluntary organisations—						
* Homeland, Glasgow ...	—	—	—	—	—	—
* St. Gerard's, Glasgow ...	—	—	—	—	—	—
(iii) Total number of women admitted during the year to homes and hostels shown in (i) and (ii) (ignoring <i>re</i> -admissions after confine- ment)—173.						

† Exclusive of lying-in period.

* An arrangement has been entered into with these maternity institutions for the reception of young unmarried women.

(e) *Day nurseries :—*

Name and Address of Nursery.	No. of places provided at end of year.		No. of places taken up at end of year.	Waiting lists at end of year.
	Aged 0-2	Aged 2-5		
(i) Provided by local health authority—				
Baillieston	15	25	40	42
Bellshill	15	25	36	53
Blantyre	15	25	40	120
Cambuslang	15	25	40	41
Larkhall	15	25	35	25
Newmains	15	25	39	—
(ii) Provided by voluntary bodies	—	—	—	—
(iii) Provided by firms of manu- facturers	—	—	—	—
(iv) Others	—	—	—	—

(f) *Residential nurseries and children's homes provided as part of authority's arrangements under Section 22 of the National Health Service (Scotland) Act, 1947 :—*

Name and Address of Nursery or Home.	Whether long-stay or short-stay.	No. of beds provided at end of year.		
		Aged 0-2	Aged 2-5	Others.
(i) Maintained by the local health authority	—	—	—	—
(ii) Maintained by voluntary organisa- tions	—	—	—	—

(g) *Nurseries and Child-Minders Regulation Act, 1948.* Details of work done by the local health authority during 1948 :—

	No. of applications re-ceived.	No. of Certificates.			In force at end of year.	No. of children being cared for at end of year.	No. of inspections made.	No. of cases in which no inspection made.
		Issued.	Re-fused.	Can-celled.				
1. Nursery premises ...	1*	—	—	—	—	—	—	—
2. Child-minders ...	—	—	—	—	—	—	—	—

* Registration recommended 17/1/49—six children present.

2. MIDWIFERY SERVICE.

	Before 5/7/48.	Remainder of year.
(a) Total number of births (including still-births) occurring in the area during year—that is before correction for mother's residence ...	3,198	2,940
(b) Number of births in (a) classified to show type of case and whether doctor present at confinement :—		
(i) Cases dealt with under Maternity Services (Scotland) Act, 1937—		
(a) doctor present at confinement	443	—
(b) doctor not present ...	1,428	—
(ii) Cases dealt with under Section 23 (2) of the National Health Service (Scotland) Act, 1947—		
(a) doctor engaged and present at confinement ...	—	443
(b) doctor engaged but not present at confinement ...	—	1,249
(c) midwife alone (no doctor engaged)	—	3
(iii) Other domiciliary cases :—		
(a) doctor engaged ...	121	89
(b) midwife alone (no doctor engaged)	69	33
(c) conducted by outdoor staff of institution ...	—	—
(d) without doctor or midwife ...	3	2
(iv) Cases attended at institutions (including private maternity and nursing homes) in the area of the local health authority	1,134	1,121

Notes.

- (1) The totals of (b) (i-iv) should equal (a).
- (2) Emergency cases under Section 22 (1) of the Midwives (Scotland) Act, 1915, should not be included in the cases in which a doctor has been "engaged."

3. VISITATION BY HEALTH VISITORS DURING YEAR.

					No. visited for first time, excluding cases visited during the previous year and cases known to have previously been visited in another area.	Total visits.
<i>(a) Local health authority services :—</i>						
Expectant mothers*	...	...	...	...	Nil—being the responsibility of either the Regional Hospital Board or the domiciliary midwife.	
Infants	...	...	...	...	6,396	62,851
Children (1-5 years)†	...	...	...	...
Cases of tuberculosis	...	...	...	...	8,909	27,230
Other cases (specify type)—Home Helps,						
Nannie Scheme, Housing, etc.	...	...	...	...	—	8,585
<i>(b) School health service :—</i>						
Follow-up work	...	...	...	...	293	372
<i>(c) Other services :—</i>						
(i) Cases visited at request of general practitioner					—	—
(ii) Cases visited at request of hospital organisation					(Ante-natal—3,478) (Post-natal—819)	
					Visited at request of maternity hospital because the patients had defaulted in their attendance at clinics.	

* These visits should *not* include visits paid by a midwife who is to attend the confinement as a midwife or as a maternity nurse.

† The figure in the first column should show the number of children visited for the first time since reaching 1 year of age.

4. HOME NURSING.

- | | |
|--|--------|
| (i) Number of cases attended by home nurses under arrangements made by the Local Health Authority under Section 25 of the National Health Service (Scotland) Act, 1947, between 5/7/48 and end of year | 3,088 |
| (ii) Number of visits paid by nurses to these cases | 64,681 |

5. DOMESTIC HELP.

- | | |
|--|------------|
| (i) Number of Helps employed at end of year :— | |
| (a) whole-time | 1 |
| (b) part-time | 346 |
| (c) retaining fee basis | — |
| (ii) Number of cases taken during year | 873 |
| (iii) Average period of assistance | 24·21 days |

AMBULANCE SERVICES.

INFECTIOUS DISEASES.—Three ambulances are stationed at the County Hospital, Motherwell, two at Lightburn Hospital, and two at Roadmeetings Hospital. Details of their work will be found in the respective hospital reports.

MATERNITY AND CHILD WELFARE.—Three ambulances are stationed at the County Maternity Hospital, Bellshill, and details of their work are included in that hospital report.

TUBERCULOSIS.—One ambulance is stationed at Hairmyres Colony, which is mostly used on internal work.

GENERAL.—The policy commenced during the war of having a central pool of ambulances was continued in 1947. Their work is summarised as follows :—

Total Patients carried, 2,491. Miles run, 41,747.

The major running is accounted for by—patients requiring Admission, 59; Discharge, 23; Transfer, 20; Patients for X-ray, 1,268; Orthopaedic, 255; Tonsils and Adenoids, 439; Lupus, 77; Artificial Pneumothorax, 165; Mass X-ray, 46; Thoracic Out-Patients, 34; to Bridge of Earn, 19.

CLEANLINESS OF MILK SUPPLIES.

The grade of milk produced within the County during the past three years was as follows :—

							Attested		
	Certified.	Tuberculin Tested.	Standard.	Pasteurised.	Ordinary.	Total.	Graded.	Ordinary.	Not Registered.
31/12/46	... 16	542	123	2	515	1,198	531	347	—
31/12/47	... 21	584	105	2	491	1,203	584	91	344
31/12/48	... 28	642	86	5	442	1,203	658	128	377
							1946	1947	1948
Percentage of Graded Herds							57	59.1	63.1

Milk Officers.

There were 5 Milk Officers on the staff for four months of the year and 4 for the remaining eight months. Compared with the previous year this amounts to a loss of the work of 1 Milk Officer for eight months.

The visits carried out by these officers during the years 1947 and 1948 were as follows :—

							1947	1948
On account of	{ Routine work	...	...	...	...	...	2,106	2,586
	{ Unsatisfactory samples	...	...	...	...	...	1,541	1,121
	{ Graded licences	...	...	...	...	...	337	384
							3,984	4,091
Full day demonstrations							7	8
Demonstration and advice							1,068	1,365
Advice only							2,909	2,718
Samples only							—	—
							3,984	4,091

1,111 individual farms were visited out of a total of 1,198 registered premises, leaving 87 unvisited during the year.

As a result of advice from Milk Officers the following renewal of equipment and appliances was effected during the year :—

(a) Milking machines	...	...	...	...	4
(b) Tubes for milking machines	...	...	...	...	41
(c) Teat cup liners	...	...	...	...	5 sets
(d) Steam chests	...	...	...	...	2
(e) Receiving Tanks	...	...	...	...	4
(f) Milk coolers	...	...	...	...	14
(g) Sieves	...	...	...	...	2
(h) Strip cups	...	...	...	...	2
(i) Milk churns	...	...	...	...	13
(j) Milk pails	...	...	...	...	4

Milk (Special Designations) Orders and Attested Herds.

On 31st December, 1948, the number of licence holders in the County of Lanark was as follows :—

Producer's Licence :—

Certified milk	...	...	...	...	28
Tuberculin tested milk	...	...	...	...	642
Standard milk	...	...	...	...	86
Pasteurised milk	...	...	...	...	5

Dealer's Licence :—

Certified milk	...	...	...	...	1
Certified milk and tuberculin tested milk	...	...	...	...	6
Certified milk, tuberculin tested milk and pasteurised milk	...	...	...	...	3
Certified milk and pasteurised milk	...	...	...	...	3
Tuberculin tested milk	...	...	...	...	39
Tuberculin tested milk and pasteurised milk	...	...	...	...	19
Pasteurised milk	...	...	...	...	79

The following licences were granted during the year :—

(a) *Producer's* :—

Certified	...	...	...	...	...	...	8
Tuberculin tested	...	...	...	...	...	...	76
Standard	...	...	...	...	...	...	7
							<hr/> 91

(b) *Dealer's* :—

Certified	...	...	...	...	...	...	—
Tuberculin tested	...	...	...	...	...	...	3
Pasteurised	...	...	...	...	...	...	3
Heat treated	...	...	...	...	...	...	—
							<hr/> 6

(c) *Licences revoked* 2

There were 1,163 Attested Herds, 658 of which were licensed under the Milk (Special Designations) Order, 128 non-graded and the remaining 377 were not registered.

The following table gives the results of bacteriological examination of samples of graded milk taken by the Milk Officers at producers' premises during the year :—

No. of Bacteria per 1 ml.			Certified	Tuberculin Tested.	Standard.
Under	30,000	...	187	1,177	117
„	100,000	...	15	199	39
„	200,000	...	6	70	11
Over	200,000	...	9	99	24
			<hr/> 217	<hr/> 1,545	<hr/> 191
<hr/>					
Coliform Bacilli present in one-tenth of a ml.			35	—	—
Coliform Bacilli present in one-hundredth of a ml.			—	149	34

Of the 1,953 samples of graded milk taken 1,640, or 83.9 per cent., complied with the bacteriological requirements of the Milk (Special Designations) Orders ; 313 samples did not comply in the following respects :—

95 exceeded the bacterial count.

160 showed the presence of coliform bacilli.

58 exceeded the bacterial count and coliform bacilli were also present.

The samples which did not conform to the bacteriological requirements were obtained from 189 producers. There were, therefore, 523 producers of graded milk in the County whose milk supplies were found to be free from bacteriological contamination throughout the year.

The following table gives the results of chemical examination of graded milk taken during the year :—

Milk Fat, per cent.		Certified.	Tuberculin Tested.	Standard.	Non-fatty Solids, per cent.	Certified.	Tuberculin Tested.	Standard.
Under					Under			
3.0	...	1	14	2	8.5	1	26	9
3.0	...	—	2	2	8.5	6	78	28
3.1	...	1	11	3	8.6	6	144	27
3.2	...	2	18	3	8.7	8	200	25
3.3	...	3	19	4	8.8	14	281	29
3.4	...	4	33	4	8.9	20	247	21
3.5	...	—	46	14	9.0	18	185	12
3.6	...	4	67	11	9.1	10	86	6
3.7	...	2	92	12	9.2	7	31	2
3.8	...	14	86	18	9.3	2	7	—
3.9	...	4	111	14	9.4	—	—	—
4.0	...	58	787	72	9.5	1	1	—
and over					and over			
93 1,286 159				93 1,286 159				

The following table gives the results of bacteriological examination of samples of graded milk taken at dealers' premises by the Food and Drugs Inspector during the year :—

No. of Bacteria per 1 ml.	Certi- fied.	Tuberculin Tested.	Stan- dard.	Pasteur- ised.	T.T. Pasteurised.	Heat Treated
Under 30,000	14	154	4	—	1	—
„ 100,000	4	52	1	—	—	—
„ 200,000	1	18	—	—	—	—
Over 200,000	1	23	1	—	1	—
	20	247	6	—	2	—

Coliform Bacilli
present in one-
tenth of a ml.

8 — — — — —

Coliform Bacilli
present in one-
hundredth of a
ml.

— 24 1 12 1 —

The Pasteurised and Heat Treated samples procured were not examined for bacteriological content but to comply with the Milk (Special Designations) (Amendment) Order (Scotland), 1944, viz.:—

- (a) *Pasteurised Milk*.—Presence or absence of coliform bacilli, reductase and phosphatase tests only. The following table shows the results obtained :—

Coliform Bacilli.—181 negative, 12 positive (as shown in table).

Reductase Test.—189 satisfactory, 4 decolourised before 12 noon.

Phosphatase Test.—181 sufficiently heat treated, 7 insufficiently heat treated, and 5 grossly under treated.

- (b) *Heat Treated Milk*.—Examined for reductase and phosphatase tests only.

Reductase Test.—5 satisfactory, 1 decolourised before 12 noon.

Phosphatase Test.—6 sufficiently heat treated.

Of the 474 samples of graded milk taken, 407, or 85·8 per cent., complied with the bacteriological requirements of the Milk (Special Designations) Order; 67 samples did not comply in the following respects:—

21 exceeded the bacterial count.

36 showed the presence of coliform bacilli.

10 exceeded the bacterial count and coliform bacilli were also present.

The samples which did not conform to the bacteriological requirements were obtained from 21 producers and 13 dealers. There were, therefore, 44 producers of graded milk in the County whose milk on being sampled at distributors' premises was found to be free from bacteriological contamination throughout the year.

The following table gives the results of chemical examination of graded milk taken during the year:—

Milk Fat, per cent.	Certified.	Tuberculin Tested.	Standard.	Pasteurised.	T.T. Pasteurised.	Heat Treated.	Non-fatty Solids, per cent.	Certified.	Tuberculin Tested.	Standard.	Pasteurised.	T.T. Pasteurised.	Heat Treated.
Under								Under					
3·0	—	7	1	4	—	—	8·5	—	7	—	2	—	1
3·0	—	8	—	—	—	—	8·5	1	15	1	10	—	1
3·1	1	14	—	—	—	—	8·6	3	30	—	19	—	—
3·2	5	16	—	2	—	1	8·7	7	44	2	35	—	—
3·3	2	18	1	5	—	—	8·8	4	59	2	47	2	4
3·4	—	29	—	14	—	1	8·9	3	55	1	34	—	—
3·5	4	35	2	33	—	1	9·0	1	33	—	14	—	—
3·6	2	21	1	33	—	1	9·1	—	10	1	1	—	—
3·7	1	22	1	28	2	1	9·2	—	1	—	1	—	—
3·8	1	21	—	17	—	—	9·3	—	—	—	—	—	—
3·9	1	12	—	12	—	1	9·4	—	—	—	—	—	—
4·0 and over	2	51	2	15	—	—	9·5 and over	—	—	1	—	—	—
	19	254	8	163	2	6		19	254	8	163	2	6

Milk Supplied to School Children.

Two hundred and thirty-eight samples were taken by the Food and Drugs Inspector from supplies on delivery to the bottling premises, and 44 of these samples did not comply with the bacteriological standard for graded milk in the following respects ;—

16 exceeded the bacterial count.

20 showed the presence of coliform bacilli.

8 exceeded the bacterial count and coliform bacilli were also present.

These samples were procured on delivery from 44 producers in Lanarkshire.

Two hundred and seventy-three bottles of milk were procured on delivery to schools, and fifty-three samples did not conform to the standard for graded milk in the following respects ;—

13 exceeded the bacterial count.

25 showed the presence of coliform bacilli.

15 exceeded the bacterial count and coliform bacilli were also present.

The sources of these samples were not known.

The following table shows the results of the bacteriological examinations carried out :—

Bacteriological Examination of School Milk Supplies.

No. of Bacteria per 1 ml.	Jan. to Mar.		Apr. to June.		July to Sept.		Oct. to Dec.		Total.	
	Bulk.	Bott.	Bulk.	Bott.	Bulk.	Bott.	Bulk.	Bott.	Bulk.	Bott.
Under 30,000	45	75	47	72	40	36	35	36	167	219
„ 100,000	10	10	8	2	8	2	10	2	36	16
„ 200,000	2	3	3	2	3	2	3	3	11	10
Over 200,000	2	—	6	6	5	11	11	11	24	28
	59	88	64	82	56	51	59	52	238	273

Coliform Bacilli
present in one-
hundredth of a
ml.

6 6 10 8 8 21 4 5 28 40

The following table gives the result of chemical examination of 508 samples as delivered to the various schools and dealers :—

Milk Fat per cent.	No.	Solids not Fat per cent.	No.
2.5	2	8.1	—
2.6	1	8.2	—
2.8	2	8.3	1
2.9	3	8.4	3
3.0	8	8.5	17
3.1	4	8.6	61
3.2	7	8.7	97
3.3	17	8.8	121
3.4	29	8.9	127
3.5	65	9.0	51
3.6	62	9.1	24
3.7	84	9.2	4
3.8	68	9.3	1
3.9	48	9.4	1
4.0 and over	108		
	<u>508</u>		<u>508</u>

Cleanliness of Non-Graded Milk.

During the year 407 samples of milk were taken at Dairy Farms by the Milk Officers for examination in the chemical and bacteriological laboratories.

Two hundred and eighty-eight samples were submitted to the Hiscox Test ; 112 samples submitted to bacteriological examination 4 to the Resazurin Test ; and 3 to the Reductase Test.

The following table summarises the result of the Hiscox Test :—

Hiscox Test.													
	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Total
Number satisfactory ...	24	33	31	16	28	16	10	13	18	16	5	12	222
Number unsatisfactory...	1	—	2	1	8	10	17	17	8	2	—	—	66
Percentage unsatisfactory...	4	Nil	6.06	5.88	22.2	38.4	62.9	56.6	30.7	11.1	Nil	Nil	22.9

One hundred and twelve samples were submitted to bacteriological examination and 25 failed to comply to the standard with regard to the bacterial count or the presence of coliform bacilli.

Four samples were submitted to the Resazurin Test and all complied with the required standard.

Three samples were examined for Reductase and found satisfactory.

The 91 unsatisfactory samples were taken from 61 producers. All disconform results are notified to the producers in writing and a Milk Officer visits the farm to give advice on methods of production and cleanliness of utensils. The follow-up is continued in all cases until the supply conforms to the required standard.

Seventy-four samples were examined for tubercle bacilli and 2 found positive on biological examination.

Biological Examination of Milk.

	Certi- fied.	Tuber- culin Tested.	Stan- dard.	Ordin- ary.	Pasteur- ised.	School.	Total.
Samples examined ...	1	19	99	74	—	—	193
Number positive ...	—	—	2	2	—	—	4
Percentage positive ...	—	—	2.02	2.7	—	—	2.07

The number of biological examinations was limited by scarcity of guinea pigs.

Veterinary Inspection of Dairy Herds.

Under the Agricultural Act, 1937, the veterinary inspection of dairy herds was taken over by the Ministry of Agriculture and Fisheries, as from 31st March, 1938.

The following tabular statement shows the work carried out during the year :—

Herds registered	...	...	...	1,198
Herds inspected	...	...	...	2,050
Cows examined	...	...	...	69,758
Cows with abnormal condition of udder :—				
Tuberculosis	...	...	...	10
Mastitis	...	...	...	92

Report of the County Sanitary Inspector

HOUSING.

In terms of the Regulations under the Housing Acts, the following tabular statement and subsequent paragraphs show briefly the work carried out by the Department during the year 1948 :—

Number of dwelling-houses inspected	... ..	7,968
Number of dwelling-houses found to be in some respect unfit for human habitation	... ..	1,839
Number of dwelling-houses without a proper supply of wholesome water introduced into the house	... ..	404
Number of dwelling-houses without a separate water closet	...	1,761
Number of dwelling-houses in respect of which Notices were served in terms of Section 16 (1)	... ..	—
Number of dwelling-houses in respect of which undertaking has been given that the house will not be used for human habitation until it has been rendered so fit	... ..	—
Number of dwelling-houses in respect of which Demolition Orders have been made under Section 16 (3)	... ..	—
Number of dwelling-houses in respect of which Closing Orders have been made under Section 16 (3) and (4)	... ..	—

No schemes under Part I of the Housing (Scotland) Act, 1930, relating to Clearance or Improvement of Unhealthy Areas, or Part I of the Act of 1935, relating to Redevelopment Areas, were in contemplation.

Slum Clearance.

In view of the present policy of priority in the provision of new houses for families without houses and overcrowded families, no progress was made during the year towards the removal of insanitary houses ; consequently no Representations under Section 16 of the Housing (Scotland) Act, 1930, were submitted to the Local Authority owing to the lack of alternative accommodation for the occupiers.

Overcrowding.

During the year a total of 1,294 new houses of permanent construction—135 three-apartment, 1,055 four-apartment and 104 five-apartment—were completed and occupied by families living in overcrowded conditions, the total number of persons displaced being 7,360. The families were decrowded from 982 existing houses, viz., 218 one-apartment, 608 two-apartment, 124 three-apartment, 24 four-apartment

and 8 five-apartment, in addition to 312 families each living as a sub-tenant.

In addition, 1,814 temporary houses were completed and occupied during the year under review, resulting in a further 6,437 persons being displaced.

Included in the foregoing figures are 117 families in which at least one member was reported to be suffering from tuberculosis. Since 1936 no fewer than 407 such families have been rehoused under the Local Authority's Decrowding Scheme.

The following tables show the location and sizes of houses allocated together with the number of persons displaced :—

Permanent Houses.

Parish.	Locality.	Houses Allocated.			Persons Displaced.
		3-Apt.	4-Apt.	5-Apt.	
Blantyre	Blantyre	12	12	—	146
Bothwell	Bellshill	—	24	14	303
Bothwell	*Holytown	—	22	—	111
Bothwell	Newarthill	—	86	—	455
Bothwell	*Newarthill	—	98	—	586
Bothwell	*New Stevenston	—	32	—	192
Cadder	Auchinairn	—	50	—	338
Cadder	*Auchinairn	—	29	—	156
Cadder	Glenboig	—	14	6	131
Cadder	*Glenboig	—	6	—	45
Cadder	*Stepps	—	12	—	46
Cadder	*Wester Auchengeich	—	3	—	15
Cambuslang	Cambuslang	35	23	—	418
Cambusnethan	Newmains	—	126	—	778
Carlisle	Law	—	2	—	10
Carmichael	Harleyholm	—	4	—	15
Carmichael	Rigside	40	26	—	227
Carmichael	*Rigside	—	36	—	195
Carnwath	Forth	—	30	6	188
Carnwath	*Forth	—	10	—	43
Covington and Thankerton	Warrenhill	—	4	—	19
Crawfordjohn	Abington	—	14	—	48
Dalserf	Ashgill	—	16	—	89
Dalserf	Larkhall	—	110	58	1,031
Dolphinton	Dolphinton	—	8	—	26
Douglas	*Douglas	—	38	—	136
East Kilbride	Auldhouse	—	10	—	49
Glasford	Chapelton	—	10	—	50
Glasgow	Springboig	—	22	8	187
New Monkland	Caldercruix	—	76	—	538
Old Monkland	Bargeddie	24	8	—	159
Old Monkland	Calderbank	24	24	—	250
Stonehouse	Sandford	—	16	—	72
Stonehouse	Stonehouse	—	54	12	308
Totals		135	1,055	104	7,360

*Erected by Scottish Special Housing Association.

Temporary Houses.

Parish.	Locality.	Houses Allocated.	Persons Displaced.
Blantyre	Blantyre	60	226
Blantyre	High Blantyre	77	319
Bothwell	Bellshill	297	1,049
Bothwell	Holytown	6	15
Bothwell	Mossend	8	30
Bothwell	Newarthill	296	1,039
Cadder	Auchinairn	53	190
Cadder	Auchinloch	8	24
Cadder	Glenboig	39	134
Cadder	Lenzie	16	45
Cambuslang	Halfway	16	76
Cambusnethan	Newmains	129	440
Carluke	Law	11	44
Carluke	Lower Braidwood	6	17
Carluke	Upper Braidwood	4	12
Carnwath	Kaimend	10	33
Carnwath	Newbigging	7	20
Carstairs	Carstairs	4	8
Covington and Thankerton	Thankerton	10	40
Coulter	Coulter	10	25
Crawford	Crawford	10	33
Dalserf	Garrionbridge	10	31
Dalserf	Larkhall	233	864
Dalserf	Rosebank	10	28
Douglas	Douglas	14	42
Douglas	Glespin	17	55
Glasford	Glasford	14	46
Lanark	Cartland	4	12
Lanark	Nemphlar	3	9
Lanark	New Lanark	20	64
Lesmahagow	Auchenheath	14	48
Lesmahagow	Bellfield	16	49
Lesmahagow	Hawksland	10	31
Libberton	Libberton	6	24
New Monkland	Caldercruix	100	339
Old Monkland	Carmyle	56	203
Shotts	Calderhead	200	739
Shotts	Hareshaw	10	34
Totals		1,814	6,437

There were at the close of the year 2,720 additional houses in various stages of construction throughout the County, including 344 being erected by the Scottish Special Housing Association.

From the date of the Overcrowding Survey in 1935 to the end of 1948, 9,329 cases of overcrowding, involving 54,097 persons, have been relieved as a result of action taken by the Local Authority. The number of houses in which overcrowding has been relieved during the same period was (a) privately-owned houses 6,433 ; and (b) Local Authority houses 2,786. Overcrowded families to the number of 681 included in (a) and (b) have been rehoused in privately-owned houses.

New cases of overcrowding reported totalled 28 and there were 27 known cases in which dwelling-houses had again become overcrowded after having been relieved by the Local Authority.

Altogether there were on our register at the end of the year 13,528 overcrowded dwelling-houses, containing 17,205 families, with a total of 67,177 persons.

Insanitary Dwellings.

Although no action was taken by the Local Authority under Section 20 (1) of the Housing (Scotland) Act, 1925, and Section 40 (1) of the Housing, Town Planning, etc. (Scotland) Act, 1919, for the introduction of inside water supply and water closets, action, where necessary, was taken under Section 246 of the Burgh Police (Scotland) Act, 1892, as applied to the County of Lanark by Section 234 of the Lanarkshire County Council Order Confirmation Act, 1939. Difficulties were experienced, but some further progress has been made.

Rural Housing.

During the year, 92 farm servants' houses and bothies in rural areas and 46 in non-rural areas were inspected. Fifteen of the houses in rural areas and 6 in non-rural areas were found to be in some respect unfit for human habitation ; 13 and 2 respectively were without a proper supply of wholesome water introduced into the house ; and 10 and 3 respectively were without a separate water closet.

Accommodation for Seasonal Workers.—The total intimations received from employers as to the number of workers proposed to be employed was 7, and 6 applications by farmers for the approval of the Local Authority with regard to accommodation were also received during the year.

Visits of inspection were made where seasonal workers were accommodated, the workers being mainly engaged with potato crops. Conditions were generally found to be satisfactory.

Rent and Mortgage Interest Restrictions Acts, 1920-1939.

The number of applications by tenants for a certificate of the Local Authority as to the insanitary state of repair of their dwellings was 244. In every instance a careful inspection of the premises was made, and a report submitted for the consideration of the Committee. Including applications still to be dealt with from the preceding year, certificates were granted in 217 cases, 10 were refused and 17 continued.

Intimation was sent to the owner of each dwelling, giving details of the defects found, and, in many cases, repairs were immediately carried out.

Applications by Landlords.—Applications were received from owners of 13 houses in respect of which certificates had previously been granted to the tenants, requesting a report of the Local Authority to the effect that the houses were now in a reasonable state of repair. Including those continued from the previous year, reports were granted in 19 cases, and one was refused.

Ruinous and Dangerous Buildings.

There was a further increase in the number of ruinous and dangerous buildings reported during the year and 89 Notices were served on owners requiring them, in terms of Section 191 of the Burgh Police (Scotland) Act, 1892, as applied to the County by Section 10 (2) of the Local Government (Scotland) Act, 1908, to take down or secure such buildings. In the majority of cases immediate steps were taken to have repairs carried out or the dangerous buildings demolished, and the remainder are still being dealt with.

Prosecutions.—The owners of 10 properties were prosecuted for failing to secure dangerous buildings. The necessary work was duly carried out in each case.

Drainage.

There are still 63 Special Drainage Districts within the County no new districts having been formed during the year. No serious complaints as to the public sewerage systems were recorded.

Water Supply.

The water supply from the various reservoirs belonging to the Local Authority was more than sufficient to meet all demands. Complaints were received as to local deficiencies but these were mostly found to be due to defective service pipes, and, on being brought to the notice of the respective owners, were remedied in every instance.

Water Samples.—During the year 292 routine samples of water were taken by the Sanitary Staff from public supplies at various places, and all were submitted for chemical analysis and bacteriological examination. As the result of complaints received 53 samples were also taken from private supplies and submitted for analysis. Action was taken where found necessary.

Scavenging.

In the First District Council Area the work of collection and disposal of refuse is carried out wholly by contractors ; in the Second, Third, Seventh and Ninth District Council Areas some contractors are employed, while in the Fourth, Fifth, Sixth and Eighth Areas the work is executed wholly by vehicles and staff under the direct control of the District Councils.

During the period under review the work of scavenging in the districts undertaken by direct labour was generally carried out in a satisfactory manner, but in some of the districts where contractors undertook the work it was done only with the greatest difficulty.

Salvage.—From the commencement of our operations in July, 1940, to December, 1948, the amount and value of material collected is as follows :—Waste paper, 10,444 tons valued at £62,778 ; other material totalling 27,806 tons, valued at £37,256, giving a total of all material—38,250 tons valued at £100,034.

Housing Schemes outwith Special Scavenging Districts.—The collection and removal of refuse weekly from the dwellings at the following Housing Schemes still outwith Special Scavenging Districts was carried out by the Scavenging Staffs of the respective District Councils, viz.:—Mollinsburn, Moodiesburn, Bridgend, Mount Ellen, Craigendmuir, Gartness and Carnbroe. The refuse from the Agricultural workers' houses at Dillarburn, Lesmahagow ; Ryelands, Strathaven ; and Leaburn, East Kilbride, is collected and removed weekly by contractors.

Provision of Dustbins.—During the year 163 Notices in terms of Section 23 of the Burgh Police (Scotland) Act, 1903, were served on owners of tenement houses within Special Scavenging Districts requiring them to provide proper covered galvanised-iron ashbins of specified cubic capacity. Owing to the difficulty of supplies, however, a considerable period elapses before the necessary receptacles are provided and in several cases the matter was reported to the Committee with a view to proceedings, in terms of Section 24 of the Act, being instituted, but it was not found necessary to take legal action, as the necessary ashbins were duly supplied.

Nuisances.

The number of inspections made for the detection of nuisances was 68,918 and the number of nuisances recorded was 2,246, comprised chiefly of choked drains, sinks, and water closets. Several chokages were caused through carelessness on the part of the occupiers of dwelling-houses, and warnings were given to those concerned.

Intimations under Section 19 of the Public Health Act were issued to authors of nuisances in 1,280 cases, and in many instances the cause of complaint was removed within a reasonable period. Where the intimation had no attention, Statutory Notices under Section 20 of the Act were served, and these numbered 445.

Prosecutions.—Court proceedings were instituted against the owners of nineteen properties where nuisance conditions still existed after service of the Statutory Notices. In twelve of the cases the Respondents, after having the nuisances removed, were found liable in expenses. The remaining cases are still being dealt with.

Unfenced Mine Shafts.—Intimations were received in the course of the year from H.M. Inspector of Mines of the abandonment of certain mines, and calling the attention of the Local Authority to the provision of Section 26 of the Coal Mines Act, 1911, requiring every shaft and outlet to be kept surrounded by a structure of a permanent character sufficient to prevent accidents, and making failure to comply with that requirement a nuisance within the meaning of Section 16 of the Public Health Act. The matter was taken up with the various owners, and in most cases precautions have been taken. In the remaining cases negotiations are proceeding with a view to the necessary work of protection being carried out.

Rats and Mice Destruction.

Many investigations were conducted during the year in connection with the infestation by rats of various premises throughout the County, and the total number of premises dealt with by our Rat Catchers was 239.

The number of trapping operations was 594 and gassing was carried out on 448 occasions. The total of actual and estimated number of rats (including litters) destroyed was 14,845, as well as 584 mice.

The various refuse dumps in the County were regularly inspected for the presence of rats, and where conditions warranted action was taken. Cyanogas and various poisons were used with satisfactory results.

Cinemas.

The cinemas within the County were all regularly inspected during the year and a good standard of cleanliness was found to be maintained in the halls and conveniences. Defects, mostly of a minor character, were found in several premises, but these were attended to on being brought to the notice of the managers concerned.

Public Conveyances.

During the year many inspections of public conveyances were made and the general cleanliness of the vehicles was found to be satisfactory.

Factories.

The total number of factories on our register at the close of the year was 852—708 with mechanical power and 144 without mechanical power. The inspections numbered 1,097, including 961 of factories with mechanical power, 133 of factories without mechanical power, and 3 of other premises. The following cases found in the course of our routine inspections, and reported by H.M. Inspector of Factories, were dealt with:—Want of cleanliness, 6 ; inadequate ventilation, 4 ; insufficient sanitary conveniences, 20 ; unsuitable, 5 ; not separated for sexes, 2 ; other offences, 5. The following is a note of the industries and handicrafts carried on in the various factories :—

FACTORIES USING MECHANICAL POWER.

Aluminium	3	Iron Founding	12
Agricultural Implements	3	Industrial Furnishings	1
Aerated Waters ...	3	Joiner	56
Asphalte	2	Laundry	10
Artificial Stone ...	1	Leather Goods	15
Aircraft	1	Locomotive	3
Butcher	91	Motor Repairs	63
Baker	107	Moss Litter	2
Bricks	20	Moulding	2
Blacksmith	26	Metal Breaking	4
Bone Meal	1	Milk Bottling Tops ...	1
Briquettes	4	Nails	2
Bolts and Nuts	1	Oil Cakes	1
Bleaching	3	Oil Blending	2
Boiler-making	1	Printing	3
Boot Repairs	27	Paper-making	4
Bonded Store	1	Paintwork	3
Building Contractor	6	Plumber	8
Confectionery	4	Panel Beating	1
Concrete Blocks ...	11	Preserves	3
Cartwright	2	Pattern Making	1
Concrete Pipes	1	Quarry	4
Coopering	1	Rubber	1
Coalwashing	2	Roof Frames	1
Coachbuilding	4	Ropes and Twines ...	2
Cabinet-making ...	4	Radio Repairs	3
Chains	1	Sawmill	12
Cement	1	Steel-making	10
Chemical	1	Spinning and Weaving	6
Clothing	6	Stone Crushing	7
Chairs	1	Soap Works	1
Corn Grinding	1	Shoemaker	12
Dry Batteries	2	Saddler	1
Drugs	1	Telephones	1
Dressmaker	4	Tube-making	3
Dyeing	1	Tailor	5
Electricity Generation	4	Tile Works	6
Electrical Engineering	13	Tar	2
Enamelled Baths ...	1	Tyres	1
Fireclay	4	Waggons	3
Firewood	2	Wire Work	1
Firelighters	3	Wines	1
Graith	8	Watchmaker	2
General Engineering	21	Wheels	1
Gasworks	4	Welding	2
Gut Scraping	1	Woodwork	4
Hamcurer	1	Whinstone	2
Hosiery	9		
Ice Cream	1	Total	708

FACTORIES WHERE NO MECHANICAL POWER IS USED.

Brickwork	2	Plumber	16
Butcher	8	Painter	7
Blacksmith	15	Photographer	1
Boot Repairer	7	Rag Store	1
Baker	14	Roofing Materials	1
Cabinet-maker	1	Saddler	5
Clothing Factory	4	Soap-boiler	1
Dressmaker	2	Shoemaker	9
Engineering	2	Tailor	15
French Polisher	1	Tripe-Dressing	1
Grain	1	Upholsterer	1
Hosiery	1	Watchmaker	3
Joiner	14		
Motor Repairs	9	Total	144
Motor Demolition	1		
Mason	1		

Fire Escapes.—Applications were received for certificates as to means of escape in case of fire and after the necessary work had been carried out to our satisfaction, certificates were granted in 18 cases.

Outworkers.—Two lists, containing sixteen outworkers, were received from other Authorities. Inspections were made of all the premises which were found in a satisfactory condition.

Public Schools.

The various public schools within the County were inspected and several matters requiring attention were brought to the notice of those responsible. The general cleanliness of the classrooms and lavatories was found to be satisfactory. During the year progress was made in the introduction of modern sanitary conveniences in schools in the rural areas of the County.

Tents and Vans.

During the year 143 inspections of tents and vans were made, and, with several exceptions, all the premises were found in a satisfactory condition.

Common Lodging-Houses.

The only registered common lodging-house in the County, situated at Mossend, was inspected regularly and the keeper's attention was directed to many defects which were duly rectified. Conditions generally were better than in previous years.

Dairies.

During the year 1,465 visits of inspection were made by the Sanitary Staff to dairy premises, and in several instances structural defects were reported and dealt with under the Local Authority's Bye-laws.

Registration.—The number of new certificates of registration granted by the Local Authority was 112, making a total of 1,470 registered dairies—1,194 producers and 276 retailers only—at the close of the year. Included in the foregoing total are 70 retailers by vehicles from outwith the County Area. The approximate number of dairy animals found in registered byres was 24,000.

Exempted Premises.—The conditions and cleanliness of the 332 exempted premises were generally found to be satisfactory. The approximate number of cows in such premises was 500.

Burgh of Biggar.—The registered milkshop within the Burgh, for bottled milk only, continues to be kept in a satisfactory condition.

Burgh of Lanark.—There are two registered producer-retailers and two registered retailers of milk only, within the Burgh, and the premises were all found to be kept in satisfactory order.

Ice Cream.

The Ice Cream (Scotland) Regulations, 1948, came into operation on 1st November. The Regulations deal with four main issues, viz.:— (1) Registration of premises and vehicles used in the manufacture, storage or sale of ice cream; (2) Construction and condition of apparatus, equipment and utensils used for these purposes; (3) Cleanliness of staff engaged in the work; and (4) Heat treatment of the ingredients of Ice Cream. This entailed the inspection and survey of all ice cream premises in the County. Subsequent meetings with producers were held at their premises when the requirements of the Regulations were fully discussed. The degree of co-operation has been very satisfactory, and many of the producers have taken steps to alter their existing premises or build new premises to comply with the Regulations.

The following table shows the position at the close of the year :—

	County Area		Lanark Burgh		Biggar Burgh	
	Premises	Vehicles	Premises	Vehicles	Premises	Vehicles
Applicants registered...	15	2	—	—	1	—
Applicants who gave an Undertaking to carry out improvements within three months	88	53	3	—	2	—
Applicants who gave no Undertaking but with whom negotiations are proceeding ...	30	20	2	—	—	—
Applications withdrawn	4	11	—	—	—	—
Exempted premises ...	11	4	—	—	—	—
Totals ...	148	90	5	—	3	—

Houses Let in Lodgings.

Owing to the general scarcity of suitable housing accommodation in certain districts of the County, the registration of houses let in lodgings is still in abeyance. Numerous inspections were made, however, of houses where single lodgers were kept, or apartments sub-let to families, and action was taken where gross overcrowding was found.

Offensive Trades.

There are now within the County four private slaughterhouses, situated as follows:—Carstairs Mains (Sheep only); Symington (Sheep only); Lanark (Knackery) and Omoa (Knackery). In the course of the year regular visits of inspection were made and the premises were all found in a clean condition.

Unsound Food and Food Inspection.

During the year there were 369 inspections of shops and other premises where foodstuffs were stored, and seizures, amounting to 11,863 lbs., were made by the Sanitary Staff.

Most of the meat was sent to a knackery for the extraction of fats, etc., and a quantity was salvaged for pig feeding. The remainder of the foodstuffs was buried or burned.

Pigstyes.

Regular inspections of pigstyes were made during the year, and, with a few exceptions, the premises were found to be kept in satisfactory order and free from nuisance conditions.

Interments.

The interments carried out at the expense of the Local Authority under Section 69 (1) of the Public Health Act numbered 11—3 adults and 8 infants. The total shows an increase of one over the previous year. The number of bodies claimed was 10 but “no sufficient person” undertook the burial. The total cost to the Local Authority amounted to £36 4s. 2d.

Burial Grounds.

The old churchyards and burial grounds throughout the County continue to be kept in a satisfactory condition.

JOHN FINNIE,
County Sanitary Inspector.

County Public Health Department,
Beckford Street,
HAMILTON, 15th March, 1949.

BURGH OF BIGGAR.

Sanitary Inspector's Annual Report for 1948.

BURGH EXTENSION.—On 16th May the boundary of the Burgh was extended to include an area of land to the south of the town extending to 25.983 acres or thereby.

HOUSING.—During the year 15 pre-fabricated and 12 permanent houses were occupied. Other 12 permanent houses are nearing completion.

SLUM CLEARANCE.—No Representations under the Housing Acts were made during the year.

INSANITARY DWELLINGS.—No improvements were carried out during the year.

SEASONAL WORKERS' ACCOMMODATION.—No applications from employers or farmers were received during the year.

RENT AND MORTGAGE INTEREST RESTRICTIONS ACTS.—No applications by tenants for certificates were received.

DRAINAGE.—The sewage purification works continue to function satisfactorily. The slaughterhouse drainage system, referred to in last Annual Report, is now in a satisfactory condition.

WATER SUPPLY.—The supply from the Burgh reservoir continues to be sufficient to meet all demands. Several samples were taken for analysis and proved satisfactory.

DAIRIES.—The registered milkshop within the Burgh, for bottled milk only, continues to be kept in a satisfactory condition.

ICE CREAM.—In connection with the Ice Cream (Scotland) Regulations, 1948, which came into operation on 1st November, inspections were made of all premises concerned and at the close of the year under review registration was granted in one instance while undertakings to carry out essential improvements were given by two dealers.

SCAVENGING.—The daily collection and removal of refuse within the Burgh continues to be satisfactorily carried out by a contractor. The refuse is deposited in a coup at Oxgate.

The public conveniences at Kirkstyle continue to be kept in a satisfactory condition. The work of providing additional lavatory accommodation is expected to begin early in the new year.

NUISANCES.—Inspections were made for the detection of nuisance conditions and no difficulty was experienced in having the defects remedied.

CINEMAS.—The local cinema continues to be kept in a clean and well-ventilated condition.

PUBLIC CONVEYANCES.—A good standard of cleanliness continues to be maintained in vehicles plying in the area.

FACTORIES.—There are 23 factories in the Burgh, 15 mechanical and 8 non-mechanical, comprising the following trades :—Sausage Manufacturers, 5 ; Tailor, 1 ; Bakers, 2 ; Cabinetmakers, 2 ; Blacksmith, 1 ; Engineers, 2 ; Joiner, 1 ; Plumber, 1 ; Shoemakers, 3 ; Gas Works, 1 ; and Motor Engineers, 4. The general standard of all the premises was found to be satisfactory.

SCHOOLS.—The classrooms and lavatories in the two schools continue to be kept in a satisfactory condition.

TENTS AND VANS.—These are met with during the holiday seasons, and, in general, conditions were found satisfactory.

COMMON LODGING-HOUSES.—There are no registered common lodging-houses within the Burgh.

OFFENSIVE TRADES.—The Burgh Slaughterhouse continues to be kept in a satisfactory condition.

UN SOUND FOOD.—Inspections of shops and other premises where foodstuffs are stored or exposed for sale were made and the quality of foodstuffs exposed for sale was good. The following amounts were seized as being unfit for human consumption ;— $1\frac{1}{2}$ cwts. Sugar and 4 lbs. Tinned Meat.

PIGSTYES.—These were inspected and found in a satisfactory condition.

BURIAL GROUNDS.—The burial grounds continue to be kept in good order and interments were carried out satisfactorily.

RATS AND MICE (DESTRUCTION) ACT.—The services of a County Rat Catcher were again engaged to deal with an infestation of rats at Oxgate Refuse Dump, and several infestations at private premises were also dealt with.

JOHN FINNIE,
County and Burgh Sanitary Inspector.

County Public Health Department,
Beckford Street,
Hamilton, 15th March, 1948.

Report of the County Building Inspector

BUILDING BY-LAWS.

The total number of plans lodged for approval amounted to 1,071, 128 of which were for planning only.

The nature of the buildings as indicated by the plans lodged were as follows :—

NEW BUILDINGS.—Houses and shops, 85 ; workshops, 95 ; public buildings, 24 ; and other buildings, 327 ; total plans, 531.

ALTERATIONS IN THE MODE OF OCCUPANCY.—Houses and shops, 274 ; workshops, 44 ; public buildings, 34 ; and other buildings, 60 ; total plans, 412.

In addition to the plans lodged under the Building By-laws, 141 plans were received and approval granted for various erections of a minor character.

The buildings were regularly inspected during the progress of the works, and the drains and sanitary fittings smoke-tested.

Housing (Scotland) Act, 1925.

No applications under Section 111 of the above Act were received for the erection of two-apartment houses.

Housing (Financial Provisions) (Scotland) Act, 1946.

1,036 houses erected by the Local Authority, and 300 houses by the Scottish Special Housing Association, Ltd., were inspected and reported on to the County Clerk as completed and eligible for grant, said houses complying with the requirements of the Department of Health for Scotland.

Housing (Rural Workers) Acts, 1926-1938.

Building operations in connection with alterations and improvements to 11 houses for the accommodation of agricultural workers or others whose economic condition is substantially the same as such workers, were completed during the year and reported on to the County Clerk with a view to issue of Certificate " B " to the respective owners.

Temporary Housing.

1,844 houses erected by the Ministry of Works were completed and accepted by the County Council during the year.

Control of Civil Building Regulations.

2,702 applications for licences to erect new houses, alter and repair existing houses, business and other premises, were received during the year, and 2,254 licences, amounting to £180,894 granted. The properties referred to in these applications were inspected and, where necessary, reports forwarded to the Ministry of Works.

TABLE I.—NUMBER OF SETS OF PLANS LODGED DURING THE YEAR 1948, IN ACCORDANCE WITH BY-LAWS 41 AND 51, CLASSIFIED ACCORDING TO THE NATURE OF THE BUILDINGS SET FORTH IN PLANS.

PARISH.	NEW BUILDINGS.				ALTERATIONS.			
	Houses and Shops.	Work-shops.	Public Build-ings.	Others. †	Houses and Shops. *	Work-shops.	Public Build-ings.	Others. ‡
Avondale	8	3	—	17	19	1	2	3
Biggar	1	—	—	1	1	—	—	2
Blantyre	1	4	1	7	4	1	1	2
Bothwell	8	11	6	37	34	6	7	3
Cadder	10	4	2	30	11	3	1	4
Cambuslang	2	2	1	18	11	4	5	—
Cambusnethan	2	4	1	11	7	4	1	—
Carlisle	7	10	—	17	22	1	—	2
Carmichael	—	—	—	6	1	—	—	1
Carmunnock	2	—	—	3	5	—	—	1
Carnwath	3	2	—	8	13	1	3	8
Carstairs	4	—	—	6	5	—	1	1
Coulter	1	—	—	—	3	—	—	2
Covington and Thankerton	—	—	—	2	2	—	—	—
Crawford	2	—	—	6	6	—	2	1
Crawfordjohn	—	1	—	—	2	—	—	1
Dalserf	4	6	—	14	11	1	4	4
Dalziel	—	1	—	2	—	—	1	—
Dolphinton	—	—	—	—	1	—	—	—
Douglas	2	4	1	4	3	1	1	—
Dunsyre	—	—	—	—	—	—	—	—
East Kilbride	4	4	—	15	8	—	—	2
Glassford	—	—	—	5	8	—	—	3
Glasgow	1	5	—	9	8	2	—	—
Hamilton	—	1	—	4	4	1	—	1
Lamington and Wandel	—	—	—	3	2	—	—	—
Lanark	—	—	—	5	5	1	1	3
Liberton	—	—	—	1	1	—	—	—
Lesmahagow	10	1	—	20	15	2	1	6
New Monkland	2	8	3	7	7	1	—	1
Old Monkland	2	8	2	38	11	2	—	—
Pettinain	1	—	—	—	—	—	—	—
Rutherglen	—	5	1	11	11	5	—	—
Shotts	5	10	6	19	18	5	3	7
Stonehouse	1	1	—	—	11	1	—	2
Symington	—	—	—	1	3	1	—	—
Walston	1	—	—	—	—	—	—	—
Wiston and Robertson	1	—	—	—	1	—	—	—
TOTAL	85	95	24	327	274	44	34	60

† Includes 19 byres, 1 cattle court, 2 calf sheds, 11 dairy premises, 9 piggeries, 14 hay sheds, 13 implement sheds, 3 mushroom houses, 32 greenhouses, 2 henhouses, 1 dog kennel, 2 restaurants, 1 canteen, 2 pithead baths, 3 pavilions, 5 shelters, 1 pay-box, 3 recreation clubs, 2 surgeries, 10 offices, 2 stables, 2 loose boxes, 2 boilerhouses, 1 washhouse, 129 lock-up garages, 45 stores, 5 toolsheds, 1 aviary and 4 public conveniences.

* Includes plans for additions to dwelling-houses. In this way 35 apartments were added to 29 houses.

‡ Includes 20 byres, 2 calf sheds, 13 dairy premises, 1 barn, 5 greenhouses, 3 offices, 1 canteen, 2 pavilions, 1 pithead bath, 7 lock-up garages, 3 stores, 1 public convenience and 1 boilerhouse.

TABLE II.—SHOWING NUMBER OF HOUSES AND SHOPS SET FORTH
IN PLANS SUBMITTED UNDER BY-LAWS REGULATING THE
BUILDING OR RE-BUILDING OF HOUSES OR BUILDINGS DURING
1948.

PARISH.	NEW BUILDINGS OF						Shops.	TOTAL.
	One Apt.	Two Apts.	Three Apts.	Four Apts.	Five Apts. and Upwards.			
Avondale	—	—	7	16	—	—	—	23
Biggar	—	—	1	—	—	—	—	1
Blantyre	—	—	—	—	2	1	—	3
Bothwell	—	—	75	104	12	2	—	193
Cadder	—	—	1	250	2	1	—	254
Cambuslang	—	—	1	1	—	—	—	2
Cambusnethan	—	—	—	1	—	1	—	2
Carlisle	—	—	1	5	—	2	—	8
Carmichael	—	—	—	—	—	—	—	—
Carmunnock	—	—	—	1	—	—	—	1
Carnwath	—	—	2	26	—	—	—	28
Carstairs	—	—	1	9	—	—	—	10
Coulter	—	—	—	8	—	—	—	8
Covington and Thankerton	—	—	—	—	—	—	—	—
Crawford	—	—	—	2	—	1	—	3
Crawfordjohn	—	—	—	—	—	—	—	—
Dalserf	—	—	1	1	—	—	—	2
Dalziel	—	—	—	—	—	—	—	—
Dolphinton	—	—	—	—	—	—	—	—
Douglas	—	—	40	—	—	1	—	41
Dunsyre	—	—	—	—	—	—	—	—
East Kilbride	—	—	2	70	1	—	—	73
Glassford	—	—	—	—	—	—	—	—
Glasgow	—	—	—	1	—	—	—	1
Hamilton	—	—	—	—	—	—	—	—
Lamington and Wandel	—	—	—	—	—	—	—	—
Lanark	—	—	—	—	—	—	—	—
Liberton	—	—	—	—	—	—	—	—
Lesmahagow	—	—	5	19	—	—	—	24
New Monkland	—	—	25	—	—	1	—	26
Old Monkland	—	—	1	2	—	2	—	5
Pettinain	—	—	—	16	—	—	—	16
Rutherglen	—	—	—	—	—	—	—	—
Shotts	—	—	—	105	—	—	—	105
Stonehouse	—	—	1	—	—	—	—	1
Symington	—	—	—	—	—	—	—	—
Walston	—	—	—	12	—	—	—	12
Wiston and Robertson	—	—	—	6	—	—	—	6
TOTAL	—	—	164	655	17	12	—	848

ALEXANDER FRAME,
County Building Inspector.

County Public Health Department,
Beckford Street,
Hamilton, 22nd March, 1949.

MEAT INSPECTION—SLAUGHTERHOUSES, Etc.

As General Superintendent of Abattoirs and County Meat Inspector, I have to submit the following report for the year 1948 :—

It will be observed from Table I. that the total number of animals slaughtered at the various abattoirs was 35,353, out of which 6,239 animals were found to contain disease in some form.

Of the 6,239, there were 1,420 carcasses totally or partially condemned and 5,873 carcasses found with local conditions in which organs only were condemned, these combined being 17·63 per cent. of the total animals slaughtered, as compared with 22·54 per cent. the previous year.

Of the 5,747 cattle slaughtered at the various abattoirs, 4 were sent in by the Ministry of Agriculture and Fisheries under the Tuberculosis Order, all of which were totally or partially condemned.

Tables II. and III. show in detail, for each slaughterhouse, the class of animal slaughtered and the extent to which disease was prevalent, both in abattoirs and private slaughterhouses throughout the district.

Table IV. shows the number of organs and the diseases for which they were condemned in those cases where organs only were condemned in abattoirs.

ALFRED NIMMO.

TABLE I.

Animals Slaughtered.		Carcases condemned wholly or partially. Carcases in which the Organs only were condemned.											
		Tuberculosis.						Other Diseases.					
		Carcases.		Organs only		Carcases.		Organs only.					
Wholly	Partially.	Wholly.	Partially.										
Class.	Num- ber.	No.		%		No.		%		No.		%	
Cows ...	2,576	51	1.98	77	2.99	1,074	41.69	64	2.48	31	1.20	1,037	11.26
Heifers ...	1,056	6	.56	7	.66	166	15.72	19	1.79	9	.85	410	38.82
Bulls ...	206	1	.48	3	1.45	19	9.22	1	.48	2	.97	78	37.86
Bullocks ...	1,909	1	.05	9	.47	160	8.38	—	—	9	.47	1,263	66.16
Calves ...	93	—	—	—	—	—	—	29	31.18	1	1.07	3	3.22
Sheep ...	27,497	—	—	—	—	—	—	30	.10	9	.03	1,659	6.03
Swine ...	2,016	1	.05	2	.09	1	.05	4	.20	—	—	3	.15
Total ...	35,353	60	.17	98	.27	1,420	4.02	147	.41	61	.17	4,453	12.59

Bellskill.—TABLE II.—ANIMALS SLAUGHTERED, NUMBER HAVING CARCASSES WHOLLY OR PARTIALLY CONDEMNED, AND NUMBER HAVING ORGANS ONLY CONDEMNED.

Animals Slaughtered.	Class.	Number	Carcases condemned wholly or partially. Carcases in which the Organs only were condemned.									
			Tuberculosis.					Other Diseases.				
			Carcases.		Organs only.			Carcases.		Organs only.		
			Wholly.	Partially.				Wholly.	Partially.			
Cows ...	717	9	34	431	5	7	192					
Heifers ...	317	1	2	61	—	3	186					
Bulls ...	54	—	3	13	—	1	29					
Bullocks ...	713	—	8	103	—	8	546					
Calves ...	5	—	—	—	2	1	1					
Sheep ...	13,652	—	—	—	10	7	1,332					
Swine ...	13	—	1	—	2	—	1					
Total ...	15,471	10	48	608	19	27	2,287					

Bellshill.—TABLE III.—OTHER DISEASES FOR WHICH CARCASSES WERE TOTALLY OR PARTIALLY CONDEMNED.

Disease.	Cows.	Heifers.	Bulls.	Bullocks.	Calves.	Sheep.	Swine.	Total
Actino Bacillosis ...	—	—	—	1	—	—	—	1
Died in Transit ...	—	—	—	—	—	3	—	3
Cysticercus Bovis ...	5	3	—	2	—	—	—	10
Erysipelas ...	—	—	—	—	—	—	1	1
Fever ...	1	—	—	—	—	—	—	1
Emaciation ...	1	—	—	—	—	1	—	2
Injury ...	2	—	—	2	1	1	—	6
Joint Ill ...	—	—	—	—	1	—	—	1
Peritonitis ...	—	—	1	1	—	1	1	4
Pleurisy ...	—	—	—	1	—	6	—	7
Pneumonia ...	—	—	—	—	—	2	—	2
Pyæmia ...	1	—	—	—	—	2	—	3
Navel Ill ...	—	—	—	—	1	—	—	1
Arthritis ...	1	—	—	—	—	—	—	1
	11	3	1	7	3	16	2	43

Carlisle.—TABLE II.—ANIMALS SLAUGHTERED, NUMBER HAVING CARCASSES WHOLLY OR PARTIALLY CONDEMNED, AND NUMBER HAVING ORGANS ONLY CONDEMNED.

Animals Slaughtered—		Carcases condemned wholly or partially. Carcases in which the Organs only were condemned.					
		Tuberculosis.			Other Diseases.		
Class.	Number	Carcases.		Organs only.	Carcases.		Organs. only.
		Wholly.	Partially.		Wholly.	Partially.	
Cows ...	—	—	—	—	—	—	—
Heifers ...	—	—	—	—	—	—	—
Bulls ...	—	—	—	—	—	—	—
Bullocks ...	—	—	—	—	—	—	—
Calves ...	—	—	—	—	—	—	—
Sheep ...	—	—	—	—	—	—	—
Swine ...	1,939	—	—	—	—	—	—
Total ...	1,939	—	—	—	—	—	—

Carlisle.—TABLE III.—OTHER DISEASES FOR WHICH CARCASSES WERE TOTALLY OR PARTIALLY CONDEMNED.

<i>Carlisle Slaughterhouse.</i>	Tuber- culosis.	Abscess.	Conges- tion.	Cyst.	Pleurisy.	Pneu- monia.	Total
Heads ...	29	5	—	—	—	—	34
Tongues ...	—	—	—	—	—	—	—
Lungs ...	22	—	233	—	17	7	279
Hearts ...	—	—	—	—	—	—	—
Livers ...	—	2	—	13	—	—	15
Stomachs ...	—	—	—	—	—	—	—
Bowels ...	—	—	—	—	—	—	—
Kidneys ...	—	—	—	—	—	—	—
Udders ...	—	—	—	—	—	—	—
Uteri ...	—	—	—	—	—	—	—
Feet ...	—	—	—	—	—	—	—
Plucks ...	—	—	—	—	—	—	—
	51	7	233	13	17	7	328

Larkhall.—TABLE II.—ANIMALS SLAUGHTERED, NUMBER HAVING CARCASSES WHOLLY OR PARTIALLY CONDEMNED, AND NUMBER HAVING ORGANS ONLY CONDEMNED.

Animals Slaughtered		Carcases condemned wholly or partially. Carcases in which the Organs only were condemned.					
		Tuberculosis.			Other Diseases.		
Class.	Number	Carcases.			Carcases.		
		Wholly.	Partially.	Organs only.	Wholly.	Partially.	Organs only.
Cows ...	559	13	13	218	10	10	289
Heifers ...	208	—	1	5	2	—	67
Bulls ...	34	—	—	1	—	—	26
Bullocks ...	366	—	—	29	—	—	275
Calves ...	4	—	—	—	2	—	2
Sheep ...	8,296	—	—	—	4	1	579
Swine ...	17	1	1	—	2	—	2
Total ...	9,484	14	15	253	20	11	1,240

Larkhall.—TABLE III.—OTHER DISEASES FOR WHICH CARCASSES WERE TOTALLY OR PARTIALLY CONDEMNED.

Disease.	Cows.	Heifers.	Bulls.	Bullocks.	Calves.	Sheep.	Swine.	Total.
Abscess	2	—	—	—	—	1	—	3
Bruising	2	—	—	—	—	—	—	2
Cysticercus Bovis ...	1	—	—	—	—	—	—	1
Dropsy	1	—	—	—	—	—	—	1
Emaciation	—	—	—	—	1	—	—	1
Injury	4	—	—	—	—	1	—	5
Johne's Disease ...	—	1	—	—	—	—	—	1
Mammitis	1	—	—	—	—	—	—	1
Pneumonia	—	—	—	—	—	1	—	1
Pyaemia	1	—	—	—	—	1	2	4
Septic Metritis ...	5	—	—	—	—	—	—	5
Septic Nephritis ...	1	—	—	—	—	—	—	1
Septic Pleurisy ...	—	—	—	—	1	—	—	1
Septic Pneumonia ...	—	1	—	—	—	1	—	2
Septic Peritonitis ...	1	—	—	—	—	—	—	1
	19	2	—	—	2	5	2	30

Strathaven.—TABLE II.—ANIMALS SLAUGHTERED, NUMBER HAVING CARCASSES WHOLLY OR PARTIALLY CONDEMNED, AND NUMBER HAVING ORGANS ONLY CONDEMNED

Carcases condemned wholly or partially. Carcases in which the Organs only were condemned.								
Animals Slaughtered			Tuberculosis.			Other Diseases.		
Class.	Number	Carcases.		Organs only.	Carcases.		Organs only	
		Wholly.	Partially.		Wholly.	Partially.		
Cows	...	792	23	13	233	45	11	350
Heifers	...	267	2	3	58	17	5	58
Bulls	...	65	1	—	2	1	1	6
Bullocks	...	157	1	1	28	—	—	89
Calves	...	82	—	—	—	25	—	—
Sheep	...	5,579	—	—	—	16	1	397
Swine	...	45	—	—	—	—	—	—
Total	...	6,987	27	17	321	104	18	900

Strathaven.—TABLE III.—OTHER DISEASES FOR WHICH CARCASSES WERE TOTALLY OR PARTIALLY CONDEMNED.

Disease.	Cows.	Heifers.	Bulls.	Bullocks.	Calves.	Sheep.	Swine.	Total
Actinomycosis ...	3	—	—	—	—	—	—	3
Dropsy ...	—	1	—	—	—	1	—	2
Emaciation ...	9	8	—	—	3	5	—	25
Fever ...	5	1	—	—	—	—	—	6
Gastro Enteritis ...	—	—	—	—	6	1	—	7
Injury ...	10	6	1	—	3	4	—	24
Joint Ill ...	—	—	—	—	13	—	—	13
Johne's Disease ...	2	—	—	—	—	—	—	2
Peritonitis ...	2	—	—	—	—	—	—	2
Pyæmia ...	5	3	—	—	—	3	—	11
Sarcoma ...	—	—	—	—	—	—	1	1
Septic Mastitis ...	7	—	—	—	—	—	—	7
„ Metritis ...	4	—	—	—	—	—	—	4
„ Pericarditis... 3	—	—	—	—	—	—	—	3
„ Pneumonia ...	—	1	—	—	—	1	—	2
„ Sores ...	6	1	—	—	—	2	—	9
	56	21	1	—	25	17	1	121

Shotts.—TABLE II.—ANIMALS SLAUGHTERED, NUMBER HAVING CARCASSES WHOLLY OR PARTIALLY CONDEMNED, AND NUMBER HAVING ORGANS ONLY CONDEMNED.

Animals Slaughtered—		Carcases condemned wholly or partially. Carcases in which the Organs only were condemned.					
		Tuberculosis.			Other Diseases.		
Class.	Number	Carcases.		Organs only.	Carcases.		Organs only.
		Wholly.	Partially.		Wholly.	Partially.	
Cows ...	508	7	17	192	4	3	206
Heifers ...	264	3	1	42	—	1	99
Bulls ...	53	—	—	3	—	—	17
Bullocks ...	673	—	—	75	—	1	353
Calves ...	2	—	—	—	—	—	—
Sheep ...	9,970	—	—	—	—	—	360
Swine ...	4	—	—	—	—	—	—
Total ...	11,474	10	18	312	4	5	1,035

Shotts.—TABLE III.—OTHER DISEASES FOR WHICH CARCASSES WERE TOTALLY OR PARTIALLY CONDEMNED.

Disease.	Cows.	Heifers.	Bulls.	Bullocks.	Calves.	Sheep.	Swine.	Total
Bruising	2	—	—	—	—	—	—	2
Cysticercus Bovis ...	1	1	—	1	—	—	—	3
Emaciation	—	—	—	—	—	1	—	1
Pneumonia	—	—	—	—	—	2	—	2
Septic Pleurisy	—	—	—	—	—	1	—	1
Septic Pneumonia ...	2	—	—	—	—	—	—	2
Smotheration	—	—	—	—	—	1	—	1
	5	1	—	1	—	5	—	12

Private Slaughterhouses.

TABLE II.

District.	Cattle.	Animals Calves.	Slaughtered. Sheep.	Swine.
Carstairs Estate Home Farm	—	—	184	—
Symington	—	—	45,202	—
Total	—	—	45,386	—

TABLE III.—ANIMALS CONDEMNED—WHOLLY OR PARTIALLY.

Symington Slaughterhouse.

Animals Slaughtered.	Tuberculosis.			Other Diseases.		
	Wholly.	Partially.	Organs.	Wholly.	Partially.	Organs.
Sheep, 45,386	—	—	—	9	1	264
Total	—	—	—	9	1	264

Symington Slaughterhouse.

	Abscess.	Cirrhosis	Distomatosis	Total.
Heads	—	—	—	—
Tongues	—	—	—	—
Lungs	—	—	—	—
Hearts	—	—	—	—
Livers	35	6	223	264
Stomachs	—	—	—	—
Bowels	—	—	—	—
Kidneys	—	—	—	—
Udders	—	—	—	—
Uteri	—	—	—	—
Feet	—	—	—	—
Plucks	3	—	—	3
	38	6	223	267

TABLE IV.—RETURN OF DISEASES FOR WHICH ORGANS WERE CON-
DEMNED.*Bellshill Slaughterhouse, Larkhall Slaughterhouse, Shotts Slaughterhouse,*

Organs Condemned.	Cysts.																					Total.			
	Tuberculosis.	Abscess.	Actinomycosis.	Pericarditis.	Pleurisy.	Pneumonia.	Cirrhosis.	Distomatosis.	Mammitis.	Neoplasms.	Bacterial Necrosis.	Fatty Degeneration.	Strongylosis.	Angioma.	John's Disease.	Pyæmia.	Nephritis.	Emphysema.	Chittal.	Echinococcus.	Coenurus.		Cerebralis.	Cysticercus Tenuicollis.	Cysticercus Bovis.
Heads ...	333	2	4	—	—	—	—	—	—	—	—	—	—	—	1	—	5	—	—	—	—	—	—	—	345
Tongues	118	2	11	—	—	—	—	—	—	—	—	—	—	—	1	—	5	—	—	—	—	—	—	—	13
Lungs ...	284	48	1	—	69	10	7	34	—	—	—	—	—	—	1	—	5	—	—	16	—	—	—	—	150
Hearts ...	61	2	1	28	—	—	6	—	—	—	—	—	—	—	1	—	5	—	—	—	—	—	—	—	13
Livers ...	194	369	—	7	—	—	524	2,485	—	—	2	1	761	86	1	—	7	—	—	—	5	—	283	3	488
Stomach	71	152	—	—	—	—	6	—	—	—	—	—	—	—	5	—	5	—	—	—	—	—	—	—	13
Bowels ...	83	5	—	—	—	—	—	—	—	—	—	—	—	—	16	—	5	—	—	—	—	—	—	—	3
Kidneys	9	—	—	—	—	—	—	—	—	—	—	—	—	—	2	—	34	—	—	—	—	—	1	3	242
Udders ...	24	—	—	—	—	—	—	—	1,021	—	—	—	—	—	1	—	3	—	—	—	—	—	—	—	3
Uteri ...	5	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	4	—	—	—	—	—	—	—	1
Feet ...	—	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	7	—	—	—	—	—	—	—	1
Prem ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	6
Pluck ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	16
Total	1,182	583	17	35	69	10	543	2,519	1,021	—	2	1	761	86	29	—	85	—	—	21	—	—	284	59	7,307

Note—This Table does not include the Viscera of Carcases wholly or partially condemned.

Burghs of Lanark and Biggar.

Below are tables showing in detail the class and number of animals slaughtered and the amount of disease detected at the above places. It has been arranged to carry on the work of meat inspection at these places in conjunction with the County staff by the appointment of the officials who carried out the work for these burghs previous to the County taking over the responsibility. It might be said that, meantime, nothing has been changed there, except that the returns are directed to the County Public Health Department, Hamilton. They are given here, and show in detail the exact position at these places.

Generally speaking, my opinion is that the arrangements under the Local Government Act, so far as slaughterhouses are concerned in these small burghs, where administration is in the hands of the burgh authority and meat inspection in the hands of the County authority, make it difficult to organise and carry out the work satisfactorily.

The amount of imported Meat condemned for Bone Taint was 2,195 lbs. Nineteen 6-lb. tins, making a total of 114 lbs., of Corned Meat for Lanark Slaughterhouse were also condemned.

The following amounts for Biggar Slaughterhouse were also condemned :—Imported Meat, 1,135 lbs.—Bone Taint ; and Corned Meat, sixteen 6-lb. tins, amounting to 96 lbs.

LANARK—

Animals Slaughtered—		Carcases condemned wholly or partially. Carcases in which the Organs only were condemned.						
		Tuberculosis.			Other Diseases.			
		Carcases.		Organs only.	Carcases.		Organs only.	
Class.	Number	Wholly.	Partially		Wholly.	Partially.		
Cows	...	617	31	2	31	24	9	24
Heifers	...	188	7	—	7	6	4	6
Bulls	...	119	—	—	—	—	1	—
Bullocks	...	352	1	—	1	—	—	—
Calves	...	7,093	2	—	2	52	3	50
Sheep	...	4,837	—	—	—	28	10	26
Swine	...	13	—	—	—	2	1	2
Total	...	13,219	41	2	41	112	28	108

DISEASES.

ORGANS CONDENSED.		Tuberculosis.	Abscess.	Actinomycosis.	Pericarditis.	Pleurisy.	Pneumonia.	Cirrhosis.	Mammitis.	Distomatosis.	Johne's Disease.	Cirrhosis, Haemorrhage.	Total.
Heads	... 100	2	10	—	—	—	—	—	—	—	—	—	112
Tongues	... 85	2	8	—	—	—	—	—	—	—	—	—	95
Lungs	... 201	8	—	—	—	26	17	—	—	—	—	—	252
Hearts	... 44	1	—	—	3	5	2	—	—	—	—	—	55
Livers	... 6	140	—	—	—	—	—	947	—	—	—	—	1,093
Stomachs	... 17	27	—	—	—	—	—	—	—	—	59	—	103
Bowels	... 83	2	—	—	—	—	—	—	—	—	66	—	151
Kidneys	... 2	—	—	—	—	—	—	—	—	—	—	—	2
Udders	... —	2	—	—	—	—	—	—	204	—	—	—	206
Uteri	... —	—	—	—	—	—	—	—	—	—	—	—	—
Feet	... —	4	—	—	—	—	—	—	—	—	—	—	4
Plucks	... —	1	—	—	—	—	3	6	—	6	—	—	16
Total	... 538	189	18	3	31	22	22	953	204	6	125	—	2,089

BIGGAR—

Carcases condemned wholly or partially.
Carcases in which the Organs only were condemned.

Animals Slaughtered—		Tuberculosis.			Other Diseases.		
Class.	Number	Carcases.		Organs only.	Carcases.		Organs only.
		Wholly.	Partially.		Wholly.	Partially.	
Cattle ...	477	12	2	29	22	5	298
Bullock ...	—	1	1	—	—	9	—
Calves ...	174	—	—	—	7	1	—
Sheep ...	32,826	—	—	—	38	29	—
Swine ...	6	—	—	—	—	—	—
Total ...	33,483	13	3	29	67	44	298

	Tuber- culosis	Cirr- Abscess.	Disto- hosis.	Inflam- mation.	Johne's Disease.	Mam- mitis.	Pneu- monia.	Putrifi- cation.	Total
Heads ...	12	—	—	—	—	—	—	—	12
Tongues ...	—	—	—	—	—	—	—	—	—
Lungs ...	6	—	—	—	—	—	—	—	6
Hearts ...	—	—	—	—	—	—	—	—	—
Livers ...	4	44	105	17	—	—	—	—	170
Stomachs ...	2	15	—	—	4	40	—	—	61
Bowels ...	5	4	—	—	4	42	—	—	55
Kidneys ...	—	—	—	—	—	—	—	—	—
Udders ...	—	—	—	—	—	2	—	—	2
Uteri ...	—	—	—	—	—	—	—	—	—
Feet ...	—	—	—	—	—	—	—	—	—
Plucks ...	—	11	10	—	—	—	—	—	21
Total ...	29	74	115	17	8	82	2	—	327

General

DISEASED UDDERS.—It will be observed that the total number of cows slaughtered was 2,576. Of these, 51 were totally condemned on account of generalised tuberculosis, 9 of which showed evidence of tubercle in the udder. There were 77 cows partially condemned on account of various forms of localised tuberculosis, and of these 24 had udders affected. In addition to the foregoing, there were 2,260 cows in which the disease was so localised that organs only were condemned. Of the total cows slaughtered, 1,021 cases of indurated udder or other forms of chronic mammitis were found. Many of these cases might be called doubtful tubercle in the absence of microscopic examinations.

Of the 1,475 heifers slaughtered, 38 were totally condemned and 20 partially condemned. One congenital case of tuberculosis was reported to the Ministry of agriculture and Fisheries, who trace the seller through the market or other information supplied, and thereby find the mother of the calf.

In dealing with emergency cases, all animals are prohibited from entering public abattoirs or private slaughterhouses unless accompanied by a veterinary certificate certifying that the animal is not suffering from a contagious disease, as scheduled under the Contagious Diseases (Animals) Act, except in cases of accident or consequent upon calving.

Cysticercus Bovis.

This condition was observed during the early part of August, 17. Cases were found and dealt with according to the Meat Regulations. About 1% of cattle slaughtered are affected.

Where slaughtering takes place outside the slaughterhouses (farms, etc.), the requirements of the Meat Regulations (Scotland), 1932, are complied with.

The whole system of meat inspection is linked up with the County Bacteriological Laboratory, and, when necessary, histological and bacteriological work is carried out by the Bacteriologist.

The Abattoirs have been under the control of the Ministry of Food since 15th January, 1940. The Administrative Staff, although still acting for the Local Authority, act also for the Ministry of Food. Two companies also operate for the Ministry, namely, The South of Scotland Abattoirs, Ltd., as slaughtering contractors, and The South of Scotland Wholesale Meat Supply Association for the distribution of meat.

BUILDINGS.—Throughout the County there are still Five Public Slaughterhouses in constant use and these are sufficient to meet the requirements under the Food Control. Of the remaining Five Abattoirs, Stonehouse has been used by Stonehouse Hospital. Blantyre, Forth, Lesmahagow and Douglas are let with the usual safeguard that if they were required for use again the let would be terminated. Repairs and painter work, etc., have received the attention of the appropriate committee, and all requirements were attended to by the Works Department. The properties and equipment are consequently kept in good order, but at a very considerable cost. The premises at Baillieston have been taken over by the County Lighting Department.

Private Slaughterhouses.

Two licences were granted for the slaughter of sheep only, one for a private institution, and one under the Ministry of Food's export scheme.

By-laws for public and private abattoirs throughout the County would be helpful if issued, but no by-laws suitable to present circumstances have yet been adopted, although they have been prepared and under consideration many years ago.

The visits to private slaughterhouses and other places, outside abattoirs, were as follows :—

Private slaughterhouses	...	...	10	.
Butcher's shops, vans, stores, etc.	...	...	2,956	

In addition to the above, there are the observations by the Superintendent in each district, which in the past have not been recorded as visits.

Public Health (Meat Inspection) Regulations (Scotland), 1932, Article 15.

Two permits for meat stores were dealt with during the year.

Licences had to be obtained from the Bacon Development Board to slaughter pigs at Carluke and Strathaven Slaughterhouses under the Bacon Industries Act, 1938-1939, for the manufacture of bacon. Under the Bacon development Board it is necessary that the Board should have control of the bacon from the source up to the manufacture of bacon, and Carluke and Strathaven are the only districts in which there is sufficient demand for a small factory.

COLD STORES.—There are 142 cold stores, the cooling arrangements of which are—ice, 15 ; mechanical, 127. In other parts of the County the registration has not yet been arranged, but the necessary attention has been given to all under Section 43 of the Public Health (Scotland) Act, 1897, and the new Meat Regulations, with satisfactory results.

During the year a large number of inspections were made to cold stores, and, generally speaking, their contents were found sound and the apartments kept in a satisfactory condition.

UNSOUND MEAT.—At abattoirs and private slaughterhouses all condemnations have been carried out with owner's consent. The total weight of meat condemned outside the abattoirs (including private slaughterhouses, flesher's shops, and farms where special permits for slaughtering were authorised) amounted to 16,641 lbs. of Bone Taint, and 234 tins of Corned Meat, weight being 1,315 lbs. The total weight of meat condemned at our abattoirs was 42,567 lbs., and weight of organs condemned was 104,212 lbs. All condemned meat is the property of the Ministry of Food.

Periodic visits were made to the Special Schools, advice given regarding the butchermeat supplies, and reports made on inspections. Generally speaking, supplies were found satisfactory, so far as the soundness of the meat was concerned. Supplies are similar to the ordinary meat ration allowances under Food Control.

Humane Slaughtering of Animals.

The various methods of humane slaughtering have received careful consideration from time to time, not only by the officials, but also by the County Council. The mechanical instruments have been adopted in all the slaughterhouses in the County since the beginning of the Slaughter of Animals' Act. During the war the Cash Captive Bolt Pistol has been in use for large and small animals.

The electric stunner is now in use at Carluke, Bellshill, Larkhall Shotts and Strathaven Slaughterhouses for the slaughter of pigs and sheep, and has proved to be superior in efficiency to any other method yet experienced. It gives more satisfaction to the ham curer, the pork being perfectly bled and free from shot marks (capillary extravasation), as found in cases where the mechanical bolt pistol is used.

With the installation of Electricity at Shotts, the electric Stunner is now in use for small animals at all our Slaughterhouses.

Foods and Drugs

Senior Inspector and Sampling Officer—WM. J. IRONS.

The following tabular statement shows the work carried out in the County Area and the Burghs of Biggar and Lanark, and the manner in which the samples were procured, etc.

District.	Inspections made.	Samples procured.			Total.	Analysed.	
		Formal.	Informal.	Received privately.		Public Analyst.	Chemical Laboratory
County Area ...	2,105	90	781	4	875	90	785
Burgh of Biggar	38	9	19	—	28	9	19
Burgh of Lanark	39	1	34	—	35	1	34
Total ...	2,182	100	834	4	938	100	838

The following table shows the nature and number of samples purchased and received, the number analysed, and the number found deficient :—

Article.	Procured.	Analysed.	Deficient or Adulterated.
Sweet Milk	452	452	69
Tuberculin Tested Milk ...	5	5	—
Dried Milk	2	2	—
Ice Cream	119	119	—
Butter	1	1	—
Margarine	3	3	—
Dried Egg Powder	1	1	—
Whisky	22	22	2
Diluted Spirits	1	1	—
Rum	5	5	—
Ruby	1	1	—
Mince	142	142	8
Sausages	130	130	5
Sausage Meat	1	1	—
Roast	2	2	—
Potted Meat	2	2	—
Cooking Fat	25	25	—
Lard	2	2	—
Cake Powder	1	1	—
Custard Powder	1	1	—
Semolina	2	2	—
Sago	1	1	—
Ground Rice	1	1	—
Barley	2	2	—
Dates	4	4	—
Appleade	1	1	—
Coffee	1	1	—
Drugs	8	8	1
	938	938	85

Twenty-one of the deficient samples were taken formally and 64 informally. With regard to the formal non-genuine samples, informations were lodged with the County Clerk. The vendors from whom the informal samples were procured were kept under observation and formal samples taken.

The following table shows the formal non-genuine samples dealt with during the year and the action taken in each case.

Registered Number.	Article.	Date Purchased.	Action taken.
25	Sweet Milk	6th April, 1948.	Cautionary letter sent by County Clerk.
29	Do.	9th April, 1948.	Do.
37	Mince	14th May, 1948	do.
38	Slicing-Sausage	14th May, 1948	Pled guilty at Airdrie Sheriff Court, 18th June, 1948. Fined £2.
45	Sweet Milk	20th May, 1948	Cautionary letter sent by County Clerk.
47	Do.	27th May, 1948	Taken at request of Burgh of Airdrie.
50	Whisky	25th June, 1948	Cautionary letter sent by County Clerk.
55	Sweet Milk	14th July, 1948	Do.
58	Do.	14th July, 1948	do.
63 } 64 } 65 }	do.	18th August, 1948	do.
66 } 67 } 68 }	do.	19th August, 1948	Taken at request of City of Edinburgh.
69	Mince	20th August, 1948	Pled guilty at Lanark Sheriff Court, 5th Oct., 1948. Fined £2, plus £1 8s. 6d. expenses.
78	Sweet Milk		Cautionary letter sent by County Clerk.
80	Do.	16th Sept., 1948	Found guilty after proof at Airdrie Sheriff Court. Fined £5.
84	Slicing-Sausage	25th Sept., 1948	Pled guilty at Airdrie Sheriff Court. Fined £2.
88	Whisky	7th Oct., 1948	Pled guilty at Lanark Sheriff Court. Fined £3, plus £1 8s. 6d. expenses.
98	Sweet Milk	24th Dec., 1948	Taken at request of Midlothian County Council.

The following tables show the samples of sweet milk analysed during the year, classified according to the percentage of milk fat, and of milk solids other than milk fat which they contained, and according to the nature of the business carried on by the vendors, viz., producer-wholesalers, producer-retailers and retailers :—

SAMPLES CLASSIFIED ACCORDING TO PERCENTAGE OF MILK FAT.
PRESUMPTIVE STANDARD—3 PER CENT.

			NUMBER OF SAMPLES.			
Milk Fat Percentage.			Producer-Wholesalers.	Producer-Retailers.	Retailers.	Total.
1.1	...	...	—	1	—	1
1.7	...	...	1	—	—	1
1.8	...	...	1	—	—	1
2.2	...	...	1	1	—	2
2.4	...	...	—	2	—	2
2.5	...	...	2	—	—	2
2.6	...	...	2	2	—	4
2.7	...	...	3	2	—	5
2.8	...	...	8	2	—	10
2.9	...	...	8	5	1	14
3.0	...	...	12	9	1	22
3.1	...	...	16	13	—	29
3.2	...	...	19	14	—	33
3.3	...	...	26	10	1	37
3.4	...	...	29	15	2	46
3.5	...	...	32	13	1	46
3.6	...	...	15	7	—	22
3.7	...	...	22	11	1	34
3.8	...	...	29	9	1	39
3.9	...	...	12	9	—	21
4.0	...	...	14	6	—	20
4.1	...	...	5	4	—	9
4.2	...	...	5	5	—	10
4.3	...	...	4	5	1	10
4.4	...	...	7	2	—	9
4.5	...	...	3	4	—	7
4.6	...	...	1	1	—	2
4.7	...	...	—	1	—	1
4.8	...	...	4	2	—	6
4.9	...	...	1	1	—	2
5.1	...	...	—	1	—	1
5.2	...	...	—	1	—	1
5.3	...	...	—	1	—	1
5.9	...	...	1	—	—	1
6.6	...	...	1	—	—	1
			284	159	9	452

SAMPLES CLASSIFIED ACCORDING TO PERCENTAGE OF MILKSOLIDS
OTHER THAN MILK FAT.
PRESUMPTIVE STANDARD—8·5 PER CENT.

Non-Fatty Solids Percentage.	NUMBER OF SAMPLES.			
	Producer- Wholesalers.	Producer- Retailers.	Retailers.	Total.
7·0 	2	—	—	2
7·1 	1	—	—	1
7·3 	1	1	—	2
7·4 	2	—	—	2
7·7 	1	—	—	1
7·9 	—	1	—	1
8·0 	1	—	—	1
8·1 	1	—	—	1
8·2 	1	—	—	1
8·3 	2	10	—	12
8·4 	4	4	—	8
8·5 	26	32	1	59
8·6 	40	22	—	62
8·7 	50	19	3	72
8·8 	57	26	2	85
8·9 	38	26	2	66
9·0 	25	9	—	34
9·1 	22	8	—	30
9·2 	7	1	—	8
9·3 	3	—	—	3
9·4 	—	—	1	1
	284	159	9	452

SWEET MILK.—452 formal and informal samples were procured and 69 were found to be deficient. The procedure recorded in last year's Annual Report was adhered to during the present year, i.e., where samples of sweet milk are found to be non-genuine either in butter fat content or in non-fatty solids but no evidence of extraneous water according to the Hiscox Test is detected, the results are sent by post card to the vendor concerned. Where the Hortvet Test indicates the presence of added water a special warning is sent to the vendor concerned and where any samples found to be non-genuine twice within three months are recorded an official sample is immediately

taken by the Food and Drugs Inspector without any further notice being given to the vendor concerned. Where formal samples procured showed only a slight deficiency either in milk fat or solids not fat content a cautionary letter was sent by the County Clerk and the vendors concerned were kept under close observation.

Samples Nos. 66, 67 and 68 were taken officially on the request of the City of Edinburgh Sanitary Department. The milk is produced at a farm in the County but is wholesaled to an Edinburgh distributor. A sample taken on delivery at the distributor's premises by the City of Edinburgh officials proved to be deficient in butter fat and before taking legal proceedings a request was sent to this Department to sample the milk at the farm immediately after production. An "Appeal to the Cows" was carried out and composite samples taken, the results of which were sent to the City of Edinburgh.

Sample No. 47 refers to milk produced in the County area and sold in the Burgh of Airdrie. The sanitary officials of the latter Authority had procured an official sample which proved to be deficient in non-fatty solids and a request was made to this Department to have the milk sampled at the farm. This was done and the milk found to be genuine. The results of the analyses were sent to the Sanitary Inspector of the Burgh of Airdrie.

Sample No. 80. This vendor is a producer-retailer. His farm is situated in the County area and part of his milk is sold in the County and part in the Burgh of Airdrie. He has an unsatisfactory record and on two previous occasions has been prosecuted by the Burgh of Airdrie. The sample procured from his retail cart was found to be adulterated with water and legal proceedings were instituted. The vendor pleaded not guilty and proof was taken at Airdrie Sheriff Court. The defence set out to question the validity of the Hortvet Test and although the Sheriff who heard the case had given a previous decision in this vendor's favour when he had put up a similar defence, in this instance we were successful in convincing the Sheriff of the value of the Hortvet Test and the vendor was fined £5. The question of cancellation of Registration of an unsatisfactory vendor of this type was raised but it was felt by the County Medical Officer that he should be given one other chance before a recommendation was made to cancel his Registration under the Milk and Dairies (Scotland) Act.

Sample No. 98 refers to a sample of sweet milk taken at the request of Midlothian County Council. The producer is situated in the County

of Lanark Upper Ward and his milk is conveyed by common carrier. The Midlothian officials had obtained a sample of sweet milk at the buyer's premises which had proved to be deficient in milk fat. An explanation which was thought to be unsatisfactory had been given by the producer and accordingly the request was made that we might "Appeal to the Cows" at the farm. This was done and the analyses, together with a report on our findings at the farm, were transmitted to Midlothian County Council who instituted legal proceedings against the farmer, the result of which is pending.

ICE CREAM.—During the year under review 119 samples of ice cream were purchased from vendors throughout the County. These were submitted for both bacteriological and chemical examination and although no standard has at present been fixed under the new regulations it is an indication to this Department as to the methods employed in the manufacture of this commodity. In addition a very considerable number of inspections have been made to premises where ice cream is being manufactured, stored and sold and advice given as to the most hygienic methods to be employed. A considerable amount of work still remains to be undertaken in this field.

BUTTER.—This commodity still remains in very short supply and as in former years at the routine inspection of shops attention has been given to the proper separation of margarine from butter and the correct precautions insisted upon.

WHISKY.—Of the 22 samples procured during the year two were found to be deficient. In only one instance, however, was it thought advisable to institute legal proceedings as in the other instance the deficiency was very small and a cautionary letter was sent by the County Clerk.

MARGARINE.—Three samples were purchased and analysed all of which were found to be genuine. The proper labelling and wrapping of this commodity receives the continued attention of this Department.

MILK (SPECIAL DESIGNATIONS) ORDERS (SCOTLAND).—The supervision and sampling of all designated milks being delivered to distributors' premises throughout the County has been carried out by this Department. 474 samples were procured all of which were examined bacteriologically and chemically. Where any sample failed to comply with the required standard a note was given to the Milk Officers so that they might visit and advise the offending producer. During the year the number of Pasteurised Milk Licences has been

increased to five with the prospect of additional applications being forthcoming. At all of these depots regular sampling is carried out and check made on their methods and the proper dismantling and cleaning and sterilisation insisted upon. The results obtained have been very satisfactory.

CONTROL OF MILK TO SCHOOL CHILDREN.—238 samples were procured from producers on delivery to the various distributors in the County area. In addition 273 samples were procured from the various schools throughout the County. This gives a check on all incoming and outgoing milk and where unsatisfactory results are obtained allows concentration to be made on the vendor until conditions improve.

PUBLIC HEALTH (PRESERVATIVES, ETC., IN FOOD).—As formerly samples of mince and sausage have been procured throughout the year for examination for presence of preservative. It was found that 8 samples of mince and 5 samples of sausage failed to comply with the above regulations. In three instances it was found necessary to institute legal proceedings and in each case the vendor was convicted and fined.

MERCHANDISE MARKS ACT, 1926.

The requirements of the above Act continue to receive attention during routine visits to shops.

FERTILISERS AND FEEDING STUFFS ACT, 1926.

Twenty inspections were made and 12 samples of fertilisers taken. These consisted of Grain Manure, 1; Granular Potato Fertiliser, 3; Granular Bean and Potash, 1; Special Potato Manure, 1; Super Phosphates, 1; Nitro Chalk, 3; Granular Turnip Manure, 1; Peasemeal, 1. All of the samples taken were submitted to the Agricultural Analyst who reported that 7 were deficient to the warranty. In the majority of the samples the deficiency was very slight and in each case a copy of the Analyst's certificate was forwarded to the farmer so that he might take any action he deemed desirable.

SHOPS ACTS, 1912-1934.

Work under the above Acts has been carried out by the Food and Drugs Inspector on similar lines to previous years. With the early closing of all shops there is not the same trouble in enforcing the proper closing hours. Owing to the acute shortage of commodities the shopkeepers, as a general rule, are only too pleased to close the shop before, rather than after, the recognised closing hour.

TABLE D.—SHOWING INSPECTIONS, VISITS TO SHOPS, ETC., AND CONTRAVENTIONS IN THE COUNTY IN 1948.

Inspections to localities	89
Visits to shops, etc.	332
CONTRAVENTIONS :—	
Failure to close: Weekly Half-Holiday and under Closing Orders	—
Sale of non-exempted goods	—
Street Trading	—
Failure to give assistants afternoon off weekly ...	—
Failure to give assistants proper intervals for meals ...	—
Employing young persons over 16 years and under 18 years more than 48 hours per week	—
Failure to exhibit notices in terms of Act	3
	<u>3</u>

RIVERS POLLUTION PREVENTION.

SENIOR INSPECTOR—ALEX. O. JENNINGS.

The inspection work done during the year 1948 is summarised in the following table.

SOURCES OF POLLUTION.—INSPECTION AND POLLUTIONS DETECTED

Nature.	SOURCES LIABLE TO POLLUTE.				POLLUTIONS DETECTED.	
	Number.	Number In-spected.	Number of In-spections.	Samples Taken.	Number of Sources.	Number Detected
Coal Dross Washers ...	33	33	242	64	20	84
Ammonia, etc., Works	12	12	136	36	8	28
Paper Mills	4	4	39	42	4	21*
Print, Dye Works, etc.	3	3	22	3	—	—
Sewage Works and Outfalls	—	69	293	87	18	28
Streams, etc.	—	153	1,987	818	—	—
Mine Waters	—	15	42	26	4	6
Miscellaneous	6	6	74	19	5	22
Total ...	58	295	2,835	1,095	59	189

* Samples containing appreciably more than 6 parts per 100,000 of suspended solids.

Chemical Laboratory.

A. C. WILSON, F.R.I.C., F.C.S.

The number of specimens and samples examined during the year amounted to 7,970.

Streams.

There were 1,095 samples of which 87 were examined for evidence of sewage pollution and 145 for trade waste impurities.

SAMPLES OF TRADE EFFLUENTS.

Samples were received from following sources :—

<i>Source.</i>	<i>Number.</i>
Coal Washers	64
Paper Mills	42
Ammonia, etc. works	36
Print Dye Works	3
Sewage Works Outfalls	87
Streams	818
Mine Waters	26
Miscellaneous	19

Water Supplies.

Of the 345 samples received 292 were from public supplies and 53 from private sources.

WATER WORKS.—Camps Reservoir, 52 ; Daer, 3 ; Cambuslang Tank, 2 ; Carluke Filters, 2 ; Lintmill Reservoir, 2 ; Dura Springs, 3.

PUBLIC SUPPLIES TO BURGHES.—Lanark, 2 ; Biggar, 3.

PUBLIC SUPPLIES PRIVATELY OWNED.—Leadhills, 4 ; Douglas West, 2 ; High Burnside, 3.

PRIVATE SUPPLIES.—Shieldhill House, 3 ; Carmichael House, 2 ; Wiston Lodge, 2 ; Shieldswood Cottage, Easter Whitecastle ; Spittal Farm ; Carmichael Mill Farm ; Strawlaw Farm, all of Biggar, East Drumloch Farm, Chapelton, 4 ; Annfield Farm and Holmhead Farm, Lesmahagow, 3 each ; Newbigging Mill Farm, 2 ; Bogton Farm, Torrance, 2 ; Thankerton Colliery, 2 ; East Brackenbridge, Strathaven, 2 ; Earnock, Earnockmuir Farm and Torhead Farms, Hamilton ; West Cairnduff and Cochrane's Nursery, Strathaven ; Castle Crawford and Normangill Farms, Crawford ; Spring Valley, Chapelton ; Candy-mill Farm ; Hallcraig Cottage, Carluke ; Harperfield House, Lanark ; Turdees Farm, Salsburgh ; Railway Cottage, Beattock ; Crossknowe Farm, Crawfordjohn ; Kepplehill Farm, Shotts ; West Dunsyston Farm, Chapelhall ; Leggatefoot Farm, Covington ; Burnbank Farm, Nemphlar ; Birkenhead Farm, Lesmahagow ; Heatherygill Farm, Thankerton ; Wyndale House, Symington ; Dryfield Soap Works and Shotts Burn.

Food and Drugs (Adulteration) Act, 1928.

During the year 92 formal, 884 informal and 22 private samples were received, a total of 998 samples.

The 22 samples received privately consisted of 13 dried milks ; 3 sweet milks ; 3 custard powders ; 1 onion powder ; 1 dried peas ; 1 appleade and 1 margarine. 6 Dried milks ; 2 custard powders ; 1 sweet milk ; 1 appleade and 1 margarine were adulterated or otherwise gave rise to irregularity.

FORMAL SAMPLES.

Article.	Number Examined.	Number adulterated or otherwise giving rise to irregularity.
Sweet Milk	48	15
Tuberculin Tested Milk	3	—
Whisky	18	1
Rum	5	—
Ruby Wine	1	—
Mince	16	3
Sliced Sausage	1	1

INFORMAL SAMPLES.

Sweet Milk	467	66
Tuberculin Tested Milk	2	—
Ice-Cream	118	—
Mince	116	11
Slice Sausage	79	3
Link Sausage	45	1
Cooking Fat	27	—
Margarine	4	—
Potted Meat	2	—
Barley	2	—
Semolina	2	—
Oil of Wintergreen	2	—
Boracic Ointment	2	—
Tincture of Iodine	2	1
Diluted Spirits	1	1

and one sample each of the following—Dried Egg ; Cake Flour ; Custard Powder ; Ground Coffee ; Ground Rice ; Soft Soap ; Soap Powder ; Butter ; Sago ; Sausage Meat ; Gregory's Powder ; Liquorice Powder and Whisky.

Arising out of two formal samples, two "Appeal to the Cow" samplings were carried out. It will be observed that in both cases the quality of the milk was such that the composite samples could not have conformed to the Standards recommended in the Sale of Milk Regulations, 1901.

Cow No.	<i>Morning Sampling.</i>		<i>Evening Sampling.</i>	
	Fat per cent.	Solids not Fat, per cent.	Fat per cent.	Solids not Fat, per cent.
1	3.45	8.46	3.70	8.34
2	2.60	7.56	1.25	6.04
3	2.80	8.41	2.75	8.35
4	2.85	9.55	3.95	9.25
5	4.20	9.54	4.50	9.51
6	2.60	8.46	3.00	8.43
7	3.45	8.73	3.60	8.65
8	2.60	8.54	3.90	8.66
9	2.90	9.39	3.70	9.21
10	2.10	8.05	5.10	8.32
11	No sample.		No sample.	
12	2.35	8.68	3.70	8.88
13	2.10	5.79	2.80	5.67
14	2.80	8.40	3.30	8.44
15	2.85	9.07	4.50	8.81
16	2.70	9.58	4.70	9.42
Composite	2.90	8.71	3.60	8.55

Cow No.	<i>Evening Sampling.</i>		<i>Morning Sampling.</i>	
	Fat per cent.	Solids not Fat, per cent.	Fat per cent.	Solids not Fat, per cent.
1	4.00	8.68	3.90	8.61
2	3.20	8.12	3.05	7.93
3	4.25	8.45	3.00	8.31
4	1.90	8.19	2.65	8.13
5	2.80	8.32	2.75	8.30
6	3.80	8.59	3.70	8.48
7	3.35	8.43	4.10	7.92
8	3.45	8.85	3.40	8.84
9	2.65	6.91	3.60	8.01
10	2.70	7.84	3.35	7.68
11	3.30	8.49	3.75	8.23
12	1.00	5.61	2.30	6.27
Composite	3.10	8.17	3.38	8.35

Composite
Composite
(Evening and
Morning)

Fat—3.20 per cent. Solids not Fat, 8.27 per cent

The following table gives the monthly variation in the butter fat, and milk solids not fat of the milks received in this laboratory :—

A —Samples obtained at Farms.

B —Graded Milks obtained at Shops and Creameries.

C —School Milks.

D —Ordinary Milk obtained under Food and Drugs Act, 1928.

	A		B.		C.		D.	
	Fat per cent.	Solids not Fat, per cent.	Fat per cent.	Solids not Fat, per cent.	Fat per cent.	Solids not Fat, per cent.	Fat per cent.	Solids not Fat, per cent.
Jan.	4.08	8.84	3.86	8.89	3.73	8.80	3.80	8.79
Feb.	3.96	8.77	3.57	8.79	3.71	8.80	3.70	8.71
Mar.	4.05	8.75	3.58	8.72	3.70	8.81	3.64	8.68
Apr.	4.09	8.82	3.55	8.73	3.61	8.77	3.67	8.65
May	3.82	8.80	3.51	8.84	3.49	8.91	3.57	8.79
June	3.93	8.93	3.47	8.88	3.50	8.99	3.48	8.98
July	3.98	8.59	3.56	8.83	No Samples		3.46	8.89
Aug.	4.16	8.91	3.67	8.80	3.80	8.80	3.69	8.80
Sept.	4.28	8.88	3.78	8.85	3.84	8.85	3.84	8.84
Oct.	4.23	8.89	3.92	8.84	4.02	8.88	3.90	8.73
Nov.	4.14	8.88	3.91	8.81	4.02	8.91	3.99	8.88
Dec.	4.15	8.92	3.77	8.60	3.78	8.90	3.81	8.78
Avge.	4.07	8.83	3.65	8.80	3.74	8.86	3.69	8.78

Milks of Hygienic Quality.

1,970 samples were examined.

Certified 115

Tuberculin Tested 1,522

Standard 154

Pasteurised and Heat Treated 179

24 of these samples were deficient in milk fat and 45 in milk solids other than milk fat. 1 sample was tainted.

School Milks.—504 samples were received and 7 were found to be deficient in milk fat and 4 in milk solids not fat.

Milk Examination—Phosphatase Test.

369 samples have been examined and of these 22 samples were insufficiently heat treated and 16 others grossly undertreated, or contained an appreciable quantity of raw milk.

Motor Spirit (Regulation) Act, 1948.

13 samples were received from the Chief Constable and 4 were shown to be commercial petrol.

BACTERIOLOGICAL DEPARTMENT.

T. GOW BROWN, M.D., F.R.C.P.(E.), F.R.F.P.S., D.P.H.

The following report is submitted on the work carried out in the Bacteriological Department, Hamilton, for the year 1948.

1948.	Bacterio- logical.	Serological.	Biochemical.	Patho- logical.
Practitioners	17,456	2,787	54	—
Public Health Staff ...	11,083	6,440	4,569	—
Institutions	7,612	1,195	499	2
Burghs	5,803	3,848	1,907	4
Government Depart- ments	51	—	—	—
	42,005	14,270	7,029	6

1948.	Haemato- logical.	Biological.	Others.	Total.
Practitioners	56	6	8	20,367
Public Health Staff ...	1	445	9	22,547
Institutions	5	713	3	10,029
Burghs	13	93	16	11,684
Government Depart- ments	—	102	—	153
	75	1,359	36	64,780

SPECIMENS RECEIVED FROM BURGHS.—Hamilton, 2,001 ; Airdrie 1,545 ; Coatbridge, 2,494 ; Motherwell and Wishaw, 5,042 ; Rutherglen, 584 ; Other Areas, 18.

COUNTY HOSPITAL
NEAR
MOTHERWELL.

REPORT BY THE PHYSICIAN-SUPERINTENDENT
R. SHIRRA DEWAR, M.D., D.P.H.

PERIOD 1/1/1948 TO 4/7/1948.

At the beginning of the year 78 patients were in residence, and up to July 4th, 730 were admitted, making a total of 808. Of these, 652 were discharged well, 45 died, and 111 were in residence on the 4th July.

SCARLET FEVER.—The total admissions were 266. This disease continues to be of a mild type and there were no fatalities. In the month of June a localised outbreak occurred in the vicinity of Lanark, ice-cream apparently being the vehicle of infection—23 cases were admitted to this Hospital, all were typical mild cases, and none developed complications.

DIPHTHERIA admissions were 78 with 1 fatal case.

PUERPERAL SEPSIS admissions were 16 with 1 fatal case.

RESPIRATORY DISEASES.—Pneumonia admissions were 187; the fatality rate was 10 per cent.

MENINGEAL INFECTIONS.—Five patients were in hospital at the beginning of the year and 46 were admitted. The diagnosis was revised in 22, 1 other proved to be meningitis, and 4 remained in residence on July 4th. Of the 16 which were discharged during this period, 13 meningococcal infections recovered; 1 pneumococcal and 1 influenzal recovered, and 1 streptococcal died within 48 hours of admission. In addition, 17 cases of tuberculous meningitis proved fatal during this period.

POLIOMYELITIS.—Of the 2 proved cases, 1 was transferred to Stonehouse Hospital. The other, a boy of 13 years, had extensive paralysis involving all limbs and the intercostal muscles. With the assistance of a mechanical respirator he survived in hospital for 7 months but died ultimately of cardiac failure.

GENERAL.—On the 30th April, John Reid, M.D., D.P.H., F.R.F.P.S., retired from the position of Physician-Superintendent of the Hospital. Dr. Reid had held the post for the previous 37 years, and during his long administration the size of the Hospital had been repeatedly increased by building extensions, the original bed complement having been more than doubled. New departments were also set up including, the X-ray department, the bacteriological laboratory, the venereal disease clinic and the other out-patient departments connected with the Hospital.

On the 5th of July, the Hospital passed from the control of the County Council of the County of Lanark to the Western Regional Hospital Board in the Hamilton, Motherwell and District group of Hospitals.

During the year a continued improvement was maintained in the recruitment of nurses. There are, however, too many candidates who lack both the general education and ability to study necessary for a successful career.

TABLE 1.

ADMISSIONS (AS NOTIFIED) AND DISCHARGES DURING THE PERIOD 1/1/48 TO 4/7/48, WITH THE NUMBERS IN HOSPITAL AT THE BEGINNING AND END OF THAT PERIOD.

Disease.	In Hospital, 1st January, 1948		Admitted.		Discharged.				Remaining in Hospital, 4th July, 1948.		
					Recovered.		Died.				
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
Scarlatina	7	16	119	147	101	124	—	—	25	39
Diphtheria	4	3	37	41	39	39	1	—	1	5
Enteric Fever	—	—	1	1	—	1	—	—	1	—
Erysipelas	2	—	6	9	8	8	—	—	—	1
Puerperal Fever	—	2	—	16	—	16	—	2	—	—
Tuberculosis	—	—	9	10	1	—	7	8	1	2
Measles	—	—	2	4	2	4	—	—	—	—
Whooping-Cough	1	—	3	—	3	—	—	—	1	—
Venereal Diseases	—	—	10	13	10	11	—	2	—	—
Pneumonia	20	9	97	90	98	89	9	3	10	7
Meningitis	5	—	21	15	20	11	4	2	2	2
Poliomyelitis	1	2	1	—	—	1	1	1	1	—
Others	3	3	25	53	21	45	2	3	5	8
		43	35	331	399	303	349	24	21	47	64
		78		730		652		45		111	
		808						808			

SCARLET FEVER.

Twenty-three patients were in residence at the beginning of the year, and up to July 4th, 266 were admitted as scarlet fever. The diagnosis was revised in 56, and 3 others proved to be scarlet fever. Of these 236 cases, 172 were discharged well, and 64 were remaining in hospital on the 4th July.

REMOVAL TO HOSPITAL was carried out within the first 3 days of illness in 108, or 62·8 per cent of the cases.

THE AVERAGE DAY OF DISEASE in all cases was 3·1 days.

THE AVERAGE DURATION OF RESIDENCE of all cases was 25·6 days.

Table Showing Age and Sex of Scarlet Fever Cases.

Age-periods.	Years.	0-1	1+	2+	3+	4+	5+	6+	7+	8+	9+	10-20	20+	Total.
<i>Recovered—</i>														
Males ...		1	5	4	10	8	10	8	3	5	2	19	3	78
Females		—	1	5	7	4	12	14	3	7	5	29	7	94
Total		1	6	9	17	12	22	22	6	12	7	48	10	172

TYPE OF DISEASE.—One-hundred and sixty-three, or 94·7 per cent., of the total discharges were classified as mild, 9 or 5·2 per cent., were moderately ill.

CASES PROVED TO BE SCARLET FEVER ON OBSERVATION.—Diphtheria, 3.

CORRECTED DIAGNOSES.—Fifty-six, or 19·4 per cent., of the notified cases were wrongly diagnosed. These were:—Bronchitis, 1; doubtful, 6; measles, 8; negative, 19; rhinitis, 1; sore throat, 17; tonsillitis, 4.

DIPHTHERIA.

At the beginning of the year 7 patients were in residence, and up to July 4th, 78 were admitted as diphtheria. The diagnosis was revised in 60 cases. Of these 25 patients, 18 were discharged well, 1 died, and 6 were remaining in hospital on the 4th July.

REMOVAL TO HOSPITAL was carried out within the first three days in 68·4 per cent. of the cases.

THE AVERAGE DAY OF DISEASE in all cases was 3·3 days; of recovered cases, 3·1 days; and of fatal cases, 3 days.

DURATION OF RESIDENCE.—The average duration of residence of all cases was 38·8 days; of recovered cases, 39·7 days; and of fatal cases, 3 days.

Site of membrane.			Mild.		Moderate.		Severe.		Total.		Percentage of Total cases.	Average serum in units.
			Recovered.	Died.	Recovered.	Died.	Recovered.	Died.	Recovered.	Died.		
Faucial	...	...	17	—	—	—	—	1	17	1	94·7	29,100
Laryngeal	...	...	1	—	—	—	—	—	1	—	5·3	16,000
Total	...	...	18	—	—	—	—	1	18	1		28,420

TABLE SHOWING AGE AND SEX OF DIPHTHERIA CASES.

Age-periods.	Years.	0-1	1+	2+	3+	4+	5+	6+	7+	8+	9+	10-20	20+	Total.
<i>Recovered—</i>														
Males	...	1	—	—	—	4	1	—	—	—	1	4	—	11
Females	...	—	—	—	—	—	1	2	1	—	2	1	—	7
<i>Died—</i>														
Male	...	—	—	1	—	—	—	—	—	—	—	—	—	1
Total	...	1	—	1	—	4	2	2	1	—	3	5	—	19

CORRECTED DIAGNOSES.—Sixty, or 75·9 per cent., of the cases discharged were wrongly diagnosed :—Laryngitis, 6 ; measles, 1 ; negative, 2 ; positive swab, 5 ; scarlet fever, 3 ; serum rash, 1 ; sore throat, 24 ; tonsillitis, 17 ; Vincent's angina, 1.

FATALITY RATE.—One, or 5·3 per cent. A male, aged 3 years, was admitted on the 4th day of illness with a severe faucial diphtheria and died 3 days after admission. He had not been immunised.

ANTITOXIN.—One case had serum given before admission. The average dose of antitoxin for all cases was 28,420 units. In 1 case the intraperitoneal route was employed. In addition, 8 cases had sulphonamides.

The serum used was Burroughs, Wellcome & Co's. refined variety.

DIPHTHERIA IN IMMUNISED PERSONS.—Four, or 21·2 per cent., of the true cases had a history of previous immunisation. In addition, 8 immunised children were notified as diphtheria, in which the diagnoses were revised.

PUERPERAL SEPSIS.

Two patients were in residence at the beginning of the year, up to July 4th, 16 were admitted as puerperal sepsis or pyrexia. In 10 the diagnosis was revised. Of these 8 cases, 7 recovered, and 1 died.

TYPE OF DISEASE.—Mild, 3 ; moderate, 4 ; severe, 1.

THE AVERAGE AGE of the patients was 27·5 years ; 4 were between 21 and 25 years ; 3 between 26 and 30 ; and 1 was over 40 years of age.

THE AVERAGE DURATION OF ILLNESS of all cases prior to admission was 4·9 days.

THE AVERAGE DURATION OF RESIDENCE was 23 days.

				Admitted.	Recovered.	Died.
County of Lanark	...	...	...	5	4	1
Airdrie Burgh	...	...	...	2	2	—
Coatbridge Burgh	...	...	...	1	1	—
Total	...	...	...	8	7	1

THE FATALITY RATE was 1, or 12·5 per cent., of the total cases discharged. This patient was admitted 2 days after an abortion. She was acutely ill on admission and died 4 hours later. Post-mortem examination showed a generalised peritonitis—haemolytic streptococci were isolated from the peritoneal pus.

COMPLICATIONS AT BIRTH.—Anaemia, 1.

COMPLICATIONS DURING THE FEVER.—Abscess, 1 ; phlegmasia, 1.

CORRECTED DIAGNOSES.—Ten, or 55·5 per cent. Abortion, 1 ; anaemia, 2 ; endometritis, 1 ; mastitis, 1 ; negative, 2 ; pelvic thrombosis, 1 ; phlegmasia, 2.

CERVICAL CULTURES.—Swab on admission—haemolytic streptococci, 3 ; B. coli, 2 ; staphylococcus albus, 1 ; negative, 2.

BLOOD CULTURES.—Eight, all sterile.

OTHER PUERPERAL CONDITIONS.—Mastitis, 1 ; phlegmasia, 1.

TREATMENT.—Pelvic examination, cultures taken, appropriate doses of sulphonamides and penicillin, and large doses of iron with blood transfusion for anaemia.

ERYSIPELAS.

Two patients were in residence at the beginning of the year, up to July 4th, 15 were notified as erysipelas, and in 4 the diagnosis was revised. Of these 13 patients, 12 recovered, and 1 was in hospital on the 4th July.

SEX.—Male, 6 ; female, 6.

TYPE OF DISEASE.—Mild, 7 ; moderate, 4 ; severe, 1.

FATALITY RATE.—Nil.

SITUATION OF DISEASE.—Face, 12.

THE AVERAGE AGE was 51·4 years.

1- 5 years	...	...	...	1
25-30 years	...	...	...	1
41-50 years	...	...	...	3
51-60 years	...	...	...	2
61-70 years	...	...	...	5

THE AVERAGE DAY OF DISEASE was 5 days ; and the average residence, 14 days.

COMPLICATIONS.—Albuminuria, 1.

OTHER CONDITIONS PRESENT ON ADMISSION.—Broncho-pneumonia, 1 ; syphilis (late), 1.

CORRECTED DIAGNOSES.—Four, or 25 per cent., were wrongly diagnosed :—Cellulitis, 1 ; dermatitis, 2 ; herpes, 1.

TREATMENT.—The drug of choice was one of the sulphonamide group—some cases received penicillin in addition.

PNEUMONIA.

Twenty-nine patients were in residence at the beginning of the year ; up to July 4th, 187 were admitted, in 116 the diagnosis was revised, and 7 others proved to be cases of pneumonia. Of these 107 cases, 81 recovered, 9 died, and 17 were in hospital on July 4th.

THE AVERAGE DAY OF DISEASE of all cases on admission was 6 days ; of recovered cases, 6·2 days ; and of fatal cases, 4 days.

THE AVERAGE DURATION OF RESIDENCE of all cases was 21·3 days ; of recovered cases, 23·6 days ; and of fatal cases, 4 days.

CLASSIFICATION OF DISEASE.—Acute lobar pneumonia, 55 ; broncho-pneumonia, 35.

THE FATALITY RATE was 10 per cent.

Of the 9 fatal cases, 4 were in infants under 1 year. Five, or 55·5 per cent., were moribund and died within a few hours of admission.

TYPE OF DISEASE.

		Mild.	Moderate.	Severe.	Fatal.	Fatality Rate per cent.
Lobar pneumonia	...	30	21	1	3	8.6
Broncho-pneumonia	...	20	5	4	6	10.9
Total	...	50	26	5	9	6.7

AGE AND SEX TABLE.

Age-period. Years.	0-1	1+	2+	3+	4+	5-10	11-15	16-20	21-30	31-40	41-50	51-60	60+	Total
<i>Recovered—</i>														
Males	4	5	2	1	3	4	1	3	8	2	6	3	4	46
Females	6	6	3	1	2	7	—	1	4	1	2	1	1	35
<i>Died—</i>														
Males	2	1	1	—	—	—	—	1	—	—	2	—	—	7
Females	2	—	—	—	—	—	—	—	—	—	—	—	—	2
Total	14	12	6	2	5	11	1	5	12	3	10	4	5	90

The situation of the lesion in the lobar cases was as follows:—
Right side:—Whole, 4; lower lobe, 15; middle lobe, 3; upper lobe, 8. Left side:—Lower lobe, 24; middle lobe, 1.

COMPLICATIONS.—Six, or 6.7 per cent. Cardiac failure, 2; H.S. throat, 1; marked herpes, 1; osteomyelitis, 1; plural effusion, 1.

CORRECTED DIAGNOSES.—One-hundred and sixteen, or 43.7 per cent., of the notified cases were wrongly diagnosed. These were:—Abortion, 1; anaemia, 1; auricular fibrillation, 1; bronchial carcinoma, 1; bronchitis, 26; cold, 11; dermatitis, 1; empyema, 1; endocarditis, 1; enteritis, 1; gastro-enteritis, 2; haemothorax, 1; laryngitis, 2; marasmus, 3; measles, 13; meningitis, 1; myocarditis, 1; negative, 8; nephritis, 2; otitis media, 1; peritonitis, 1; pleural effusion, 9; pleurisy, 2; pulmonary embolism, 1; pulmonary neoplasm, 1; pulmonary fibrosis, 8; pulmonary tuberculosis, 6; pyelitis, 1; tuberculous pleural effusion, 1; rheumatism, 1; rheumatic carditis, 2; rhinitis, 1; varicose ulcers, 1; whooping cough, 2.

CONCURRENT DISEASES.—Chickenpox, 1; measles, 1.

OTHER CONDITIONS PRESENT ON ADMISSION.—Asthma, 1; anthracosis, 1; marasmus, 2; pregnancy, 1; threadworms, 1.

CASES PROVED TO BE PNEUMONIA on observation were admitted to hospital as:—Gastro-enteritis, 1; meningitis, 2; paratyphoid, 1; pleural effusion, 3.

BLOOD CULTURES.—One was positive (pneumococcus).

TREATMENT.—Pneumonia patients were treated on general lines—rest, nursing, oxygen and glucose—65 patients had sulphonamides; 19 had sulphonamides and penicillin, and 3 had penicillin.

Other Respiratory Conditions Admitted.

Bronchial carcinoma, 1; bronchitis, 1; pleural effusion, 7; pulmonary abscess, 1; pulmonary fibrosis, 1.

TUBERCULOSIS.

Up to 4th July, 19 patients were admitted as tuberculosis, and 14 others proved to be cases of tuberculosis. Of these 33 cases, 9 were discharged in various stages of improvement, 21 died, and 3 were in hospital on the 4th July.

SEX.—Male, 16; female, 14.

AGE PERIODS.—Under 5 years, 9; 6 to 10, 2; 11 to 15, 5; 16 to 20, 7; 21 to 25, 2; 26 to 30, 2; 41 to 50, 2; over 50, 1.

CLASSIFICATION.—Pulmonary, 13; meningeal, 17.

Among the 13 patients classified as pulmonary lesions, 10 were of the ordinary adult type, 1 was miliary, 1 was tuberculous effusion, and 1 was epituberculosis.

MENINGEAL TUBERCULOSIS.—Seventeen, all fatal. Males, 8; females, 9. One was under 1 year; 5 between 2 and 5; 2 between 6 and 10; 3 between 11 and 15; 4 between 16 and 20; 1 between 26 and 30; and 1 was 57 years of age.

The bacillus was found in all the cerebro-spinal fluids. Of the 17 which were typed, 17 were human.

Others which proved on Observation to be Tuberculosis.

Cerebro-spinal fever, 3; pleural effusion, 1; pleurisy, 1; pneumonia, 7; poliomyelitis, 1; puerperal fever, 1.

FATAL CASES.—Meningeal, 17; miliary, 1; pulmonary, 3.

MENINGITIS.

Five cases were in residence at the beginning of the year, and up to July 4th, 36 were notified as meningitis. The diagnosis was revised in 22 cases, and 1 other proved to be meningitis. Of these 20 cases, 15 were discharged recovered, 1 died, and 4 were in hospital at the end of the year.

SEX.—Male, 9; female, 7.

Cerebro-Spinal Fever.—Thirteen cases.

TYPE OF DISEASE.—Mild, 4 ; moderate, 8 ; severe, 1.

The Average Day of Disease was 4·9 days ; and the Average Residence, 24·8 days.

The Average Age was 4 years.

-1	...	...	...	...	3
-2	...	...	...	...	6
6-10	...	...	...	...	3
11-15	...	...	...	...	1

Fatality Rate.—Nil.

Average amount of the Sulpha drugs, per patient 24·6 G.

Average amount of Penicillin (parenterally), per patient 100,000 units.

Average amount of Penicillin (intrathecally), per patient 30,000 units.

Ten of the patients had intrathecal injections (10 to 30 thousand units per injection) with no after-effects.

PNEUMOCOCCAL MENINGITIS.—One female patient, aged 8 years, was 17 days in hospital and recovered after treatment with penicillin, 1,600,000 (60,000 units intrathecally), and 53 G. sulphatriad orally.

STREPTOCOCCAL MENINGITIS.—One male, under 1 year of age, was admitted on the 2nd day of illness and although treated with penicillin, 340,000 units (40,000 units intrathecally), and sol. sulphamezathine 3G. intramuscularly, died within 48 hours of admission.

INFLUENZAL MENINGITIS.—A male, 1 year of age, was 41 days in hospital and recovered after treatment with penicillin 1,720,000 units (40,000 units intrathecally), and sulphathiazole 29 G. orally.

OTHERS WHICH PROVED TO BE MENINGITIS.—Pneumonia, 1.

CORRECTED DIAGNOSES.—Twenty-two, or 56·4 per cent., were wrongly diagnosed :—Bronchitis, 1 ; cerebral haemorrhage, 1 ; convulsions, 1 ; enteritis, 3 ; epituberculosis, 1 ; gastro-enteritis, 1 ; meningismus, 1 ; negative, 6 ; pneumonia, 2 ; pulmonary collapse, 1 ; sore throat, 1 ; subarachnoid haemorrhage, 1 ; tuberculous meningitis, 1 ; miliary tuberculosis, 1.

OTHER VARIETIES OF MENINGITIS.—Tuberculous meningitis, 17 ; all fatal (see Tuberculosis).

MEASLES.

Up to July 4th, 6 patients were admitted as measles, in 3 the diagnosis was revised, and 22 others proved to be measles. These 25 cases were discharged recovered.

SEX.—Male, 12 ; female, 13.

TYPE OF DISEASE.—Mild, 21 ; moderate, 4.

AVERAGE AGE.—Four years. Four were under 1 year ; 15 between 1 and 5 ; and 6 between 6 and 8 years.

THE AVERAGE DAY OF DISEASE was 5·2 days, and the AVERAGE RESIDENCE, 18·4 days.

OTHERS WHICH PROVED TO BE MEASLES.—Diphtheria, 1 ; pneumonia, 13 ; scarlet fever, 8.

COMPLICATIONS.—Otitis media, 1.

OTHER CONDITIONS PRESENT ON ADMISSION.—Bronchitis, 2 ; tonsillitis, 1.

CONCURRENT INFECTIONS.—Chickenpox, 1.

CORRECTED DIAGNOSES.—Three, or 10·4 per cent., were wrongly diagnosed :—Drug rash, 1 ; mononeucleosis, 1 ; negative, 1.

VENEREAL DISEASES.

Up to July 4th, 23 cases were admitted for indoor treatment, in 4 the diagnosis was revised, and 1 other proved to have venereal disease. Of these 20 cases, 19 were discharged in varying stages of improvement, and 1 died.

SEX.—Male, 8 ; female, 12.

THE AVERAGE AGE was 14·4 years. Under 1 year, 8 ; 1 to 10, 2 ; 11 to 20, 2 ; 21 to 30, 6 ; 41 to 50 years, 2.

THE AVERAGE RESIDENCE was 15·6 days.

THE INDOOR CASES were :—Syphilis, 8 (congenital, 2) ; gonorrhoea, 3 ; venereal warts, 2 ; vaginitis, 1 ; ophthalmia, 6.

OPHTHALMIA NEONATORUM.—Of the 6 cases notified as ophthalmia neonatorum, 3 were gonococcal, and 3 were simple (no organisms present).

FATALITY RATE.—One, or 5 per cent. A female, under 1 year, died from congenital syphilis complicated with gastro-enteritis and jaundice.

CORRECTED DIAGNOSES.—Four, or 16·5 per cent. Blepharitis, 1 ; cirrhosis of liver, 1 ; marasmus, 1 ; pemphigus, 1.

OPERATIVE PROCEDURES.—Circumcision, 1 ; warts excised, 1.

TREATMENT.—Syphilis cases were treated with penicillin, mapharside and bismuth ; the gonococcal cases had penicillin and sulphonomides together with local treatment.

Other Diseases.

	Rec.	Died.		Rec.	Died.
Chickenpox ...	7	—	Infective jaundice	1	—
Enteritis ...	1	3	Poliomyelitis ...	1	1
Gastro-enteritis ...	5	3	Whooping-cough	3	—

Miscellaneous Cases Discharged 1/1/48 to 4/7/48

	Rec.	Died.		Rec.	Died.
Abortion ...	3	—	Myocarditis ...	—	1
Abscess ...	1	—	Negative ...	14	—
Burn ...	1	—	Otitis media ...	1	—
Carbuncle ...	1	—	Paronychia ...	1	—
Cardiac disease ...	1	—	Rheumatism ...	1	—
Cerebral haemorrhage ...	—	1	Sore throat ...	3	—
Conjunctivitis ...	1	—	Subarachnoid haemorrhage ...	—	1
Dermatitis ...	1	—	Tonsillitis ...	3	—
Diarrhoea ...	1	—	Urticaria ...	1	—
Impetigo ...	1	—	Varicose ulcers ...	1	—
Marasmus ...	—	1			

LABORATORY WORK.

The following table shows the number of specimens examined in the Hospital Laboratory during the period 1/1/48 to 4/7/48.

Nature of Specimen.	Nature of Examination.	Number.
Throat swabs ...	B. diphtheriae ...	1,207
Nasal swabs ...	B. diphtheriae ...	105
Ear swabs ...	B. diphtheriae ...	9
Throat swabs ...	Vincent's angina ...	3
Throat swabs ...	Haemolytic streptococci ...	1,222
Nasal swabs ...	Haemolytic streptococci ...	73
Ear swabs ...	Haemolytic streptococci ...	18
Cervical swabs ...	Haemolytic streptococci ...	14
Sputa ...	Tubercle bacilli ...	139
Pus ...	Organisms ...	21
Pleural fluid ...	Organisms ...	49
Cerebro-spinal fluid ...	Organisms ...	108
Blood ...	Culture ...	173
Blood ...	Widal ...	32
Blood ...	Count ...	677
Blood ...	Compatibility ...	3
Blood ...	Sedimentation rate ...	132
Blood ...	Wassermann ...	337
Blood ...	Kahn ...	335
Smears ...	Gonococci ...	124
Cerebro-spinal fluid ...	Wass., Coll., gold, etc. ...	13
Faeces ...	Enteric, etc. ...	85
Urine ...	Microscopic examination ...	110
Miscellaneous ...	Blood sugar, urea, etc. ...	11

County Laboratory.

Animal inoculations ...	72
Total ...	5,072

ELECTRICAL DEPARTMENT.

Period 1/1/48 to 4/7/48.

During this period, 1,601 patients had 2,025 radiological examinations. A considerable number of these examinations necessitated the taking of two or more films—in all 2,345 films were exposed.

PHYSIOTHERAPY.

Table showing work done during the period 1/1/48 to 4/7/48.

Massage.	Exercises.	Ultra-violet Light.	Passive Movements.	Radiant Heat.
68	58	27	140	39

OPERATIONS.

From 1/1/48 to 4/7/48 the following operations were performed in the Hospital :—

Disease.		Operation.	Rec.	Died.	Total.
Scarlet fever	Abscess	Incision	1	—	1
	Mastoiditis	Mastoidectomy	1	—	1
Venereal disease	Warts	Circumcision	1	—	1
	Warts	Excision	1	—	1
Puerperal fever	Abscess	Incision	1	—	1
Others	Abortion	Curettage	2	—	2
	Abscess	Incision	3	—	3
	Empyema	Rib-resection	1	—	1
	Laryngitis	Intubation	1	—	1
	Laryngitis	Tracheotomy	1	—	1
	Perineal cellulitis	Incision	1	—	1
	Pyelitis	Curettage	1	—	1
		Total	15	—	15

In addition there were 50 aspirations, 7 blood transfusions and 113 lumbar punctures.

The following operations and consultations were undertaken by the consulting staff :—

Physicians.—Consultations, 4.

Gynaecologist.—Uterine curettage, 2.

Otologist.—Consultation, 1 ; mastoidectomy, 1.

Surgeon.—Consultation, 1.

Thoracic Surgeon.— Consultation, 1.

STAFF AS AT 4th JULY, 1948.

On the 4th of July, 1948, the indoor staff comprised 1 physician superintendent, 2 assistant medical officers, 1 matron, 1 assistant matron, 6 sisters, 11 staff nurses, 46 student nurses and 1 maid.

The outdoor staff consisted of 1 sister, 16 part-time nurses, 37 maids, 6 part-time maids, 1 engineer, 3 firemen, 1 head gardener, 7 assistant gardeners, 3 chauffeurs, 2 radiographers, 3 laboratory technicians (1 military service), 1 V.D. attendant, 1 clerk, 2 clerkesses, 1 storeman.

The total staff numbered 154.

AMBULANCE WORK.

Period 1st January, 1948—4th July, 1948.

		Admis- sions.	Dis- charges.	Disin- fections.	Others.	Total.
Patients	...	642	278	—	67	987
Journeys	...	599	115	61	75	850
Mileage	...	9,359	3,004	799	1,725	14,887

LIGHTBURN JOINT-HOSPITAL.

Visiting Physician Superintendent—JOHN REID, M.D., D.P.H.

Assistant Medical Officer—ROBERT SHIRRA DEWAR, M.D., D.P.H.

The admissions and discharges during the period 1st January, 1948 to 4th July, 1948, inclusive, classified according to the disease notified and to the constituent authorities, are shown in Tables "A" and "B" respectively.

TABLE "A"

Disease.	In Hosp. 1st Jan., 1948	Admitted.	Discharged. Recovered.	Died.	In Hosp. 4th July, 1948
Scarlatina ...	17	110	100	—	27
Diphtheria ...	2	20	20	—	2
Pneumonia ...	15	84	86	7	6
Erysipelas ...	2	6	8	—	—
Other Diseases ...	5	40	38	3	4
Totals ...	41	260	252	10	39

TABLE "B"

Disease.						County of Lanark.	City of Glasgow.
Scarlatina ...	...	...	...	...	...	103	7
Diphtheria ...	...	...	...	...	...	20	—
Pneumonia ...	...	...	...	...	...	79	5
Erysipelas ...	...	...	...	...	...	6	—
Other Diseases ...	...	...	...	...	...	30	10
Totals ...						238	22

General.

At the beginning of the year 41 patients were in residence and during the period 1st January, 1948 to 4th July, 1948, 260 patients were admitted making a total of 301 patients. Of these, 252 were discharged well, 10 died and 39 were in residence on 4th July, 1948.

THE FATALITY RATE calculated on all cases discharged was 3.9 per cent.

The average monthly rate of admissions was 43, the lowest occurring in June and the highest in January, the figures being 35 and 50 respectively.

The average daily number resident was 34 and the average duration of residence was 28 days.

The greatest number resident on any one day was 48 on 20th January, and the smallest 22 on 23rd June, 1948.

One major operation was performed under a general anaesthetic and two minor procedures with a local anaesthetic.

X-RAY EXAMINATIONS.—41 patients and 11 nurses were X-rayed at the County Hospital, Motherwell.

Scarlet Fever.

17 patients were in Hospital at the beginning of the year and 110 were admitted as scarlet fever. The diagnosis was revised in 2 cases. Of these 125 patients, 98 were discharged well, and 27 were in hospital on 4th July, 1948.

REMOVAL TO HOSPITAL was carried out in 92.4 per cent of the cases in the first week of illness and 7.6 per cent in the second week.

THE AVERAGE DURATION OF DISEASE ON admission was 3 days.

FATALITY RATE.—Nil.

AVERAGE DURATION OF RESIDENCE of all cases was 28 days.

REVISED DIAGNOSES.—The diagnosis was revised in 2 cases as follows: Measles 1; Negative 1.

TYPE OF DISEASE.—The disease was generally of a mild type. Of the cases discharged 98.4 per cent were classified as mild and 1.6 per cent as moderate.

COMPLICATIONS.—18 or 14 per cent of the cases had one or more complications—these were:—Bronchitis 1; Cervical Adenitis 6; Mastoiditis 1; Measles 4; Otitis Media 1; Otorrhoea 2; Rhinitis 3; Urticaria 1; Pneumonia 1.

ASSOCIATED CONDITIONS ON ADMISSION.—Burn of Chest 1; Otorrhoea 2; Otitis Media 1.

Diphtheria.

2 cases were in hospital at the beginning of the year and 20 were admitted of whom 18 were wrongly diagnosed. Of the 4 remaining cases, 2 were discharged well and 2 were in hospital on 4th July, 1948.

REMOVAL TO HOSPITAL was carried out within the first 3 days of illness in 35 per cent of the cases.

AVERAGE DURATION OF RESIDENCE of all cases was 22 days.

THE AVERAGE DAY OF DISEASE on admission was 3 days in all cases.

CORRECTED DIAGNOSES.—In 18 cases the diagnosis was revised as follows: Tonsillitis 15; Respiratory Catarrh 1; Negative 2.

CLASSIFICATION OF DISEASE.

Site of Membrane.	MILD.		MOD.		SEVERE.		TOTALS.	
	Rec.	Died.	Rec.	Died.	Rec.	Died.	Rec.	Died.
Faucial	—	—	2	—	—	—	2	—

COMPLICATIONS.—Nil.

ANTITOXIN.—10 cases had on an average 23,000 units of Diphtheria antitoxin. 1 case had 20,000 units of Scarlet Fever antitoxin.

Pneumonia.

15 cases were in hospital at the beginning of the year and 84 were admitted in 30 of whom the diagnosis was altered. Of the 69 proved cases, 58 were discharged well, 5 died and 6 were in hospital on 4th July, 1948.

FATAL CASES.—Lobar Pneumonia 5.

CLASSIFICATION OF DISEASE.

Acute Lobar Pneumonia	47
Acute Broncho Pneumonia?.. ...	11

THE AVERAGE DAY OF DISEASE ON ADMISSION of true cases was Lobar Pneumonia 3 days, Broncho Pneumonia 5 days.

THE FATALITY RATE was 7.2 per cent.

CORRECTED DIAGNOSES.—Bronchitis 24; Pleural Effusion 2; Pulmonary Tuberculosis 3; Negative 1.

COMPLICATIONS.—6 had one or more complications, these were Boil of forearm; Erythema Nodosum 1; Meningismus 2; Septicaemia 1; Thrombo Phlebitis 1.

Erysipelas.

2 cases were in hospital at the beginning of the year. 6 were admitted, and 8 were discharged well.

CORRECTED DIAGNOSES.—Nil.

AVERAGE DURATION OF RESIDENCE was 26 days and average day of illness on admission was 4 days.

THE AVERAGE AGE was 47 years.

SITUATION OF DISEASE.—Facial 5; Legs 2; Scalp 1.

Other Diseases.

5 cases under this heading were in hospital at the beginning of the year and 40 were admitted. Of these 45 cases, 38 were discharged well, 3 died and 4 were in hospital on 4th July, 1948. In addition, alteration in the diagnoses of cases admitted under the categories already mentioned, viz.: Scarlet fever, diphtheria, pneumonia, erysipelas, removed 48 cases from these groups to the group of other diseases. The complete list of cases under the heading of other diseases is made up as follows :—

Disease.	Recovered.	Died.
Bronchitis	23	2
Chickenpox	7	—
Impetigo	1	—
Erythema Nodosum	1	—
Dysentery	1	—
Gastro Enteritis	1	1
Measles	19	—
Pleural Effusion	5	—
Pulmonary Tuberculosis	2	1
Pyrexia	2	—
Rheumatism	1	—
Respiratory Catarrh	1	—
Tonsillitis	15	—
Whooping-cough	3	1
Negative	2	—
	<u>84</u>	<u>5</u>

Ambulance Mileage.

Admissions to Lightburn	...	...	1,986 miles
Dismissals from Lightburn	...	...	1,385 miles
Admissions to Motherwell	...	...	512 miles
X-ray cases to Motherwell	...	...	834 miles
Admissions to Stonehouse	...	...	85 miles
Admissions to Hairmyres	...	...	28 miles
Admissions to Shotts	...	...	95 miles
Admissions to Longriggend	...	...	27 miles
Transfer to Yorkhill Hospital	...	...	25 miles
Case to Dr. Smith's Clinic	...	...	23 miles
Cases to Mr. Dick's Clinic	...	...	40 miles
Other runs	...	...	799 miles

5,839 miles

Staff.

The staff at 5th July, 1948, comprised—1 Visiting Superintendent ; 1 Matron ; 5 Sisters ; 3 Staff Nurses ; 13 Student Nurses.

The Domestic Staff comprised—1 Cook ; 1 Assistant Cook ; 3 Kitchen-maids ; 1 Laundress ; 3 Laundry-maids ; 4 Home maids ; 3 Ward maids ; 1 Sewing maid.

The outdoor Staff comprised—1 Engineer ; 4 Firemen ; 1 Gardener ; 1 Temporary Gardener ; 1 Chauffeur.

STAFF ILLNESSES.—1 Nurse was warded with the following illness—Rheumatism 1.

IMMUNISATION.—4 Student Nurses were DICK tested and 4 were SCHICK tested during the period ended 5th July, 1948.

NURSES' EXAMINATIONS.—One nurse passed the Preliminary Examination held by the General Nursing Council.

Buildings and Grounds.

In three of the employees' houses electric cookers were installed and electric boilers were installed in two cottages. The Gardener's cottage was completely re-decorated and in two of the cottages the kitchen was distempered.

FOR THE PERIOD 1ST JANUARY, 1948, TO 4TH JULY, 1948.

Airdrie	4	Lanark	5
Coatbridge	5	Motherwell and Wishaw	4
Hamilton	12	Rutherglen	3
					<div style="text-align: right;">Total</div>				
					<div style="text-align: right;">33</div>				

(c) *Outwith the County of Lanark.*

<i>Burghs :—</i>				<i>Counties :—</i>			
Ayr	...	...	5	Ayr	...	...	10
Clydebank	...	...	3	Clackmannan	...	...	1
Dumbarton	...	...	3	Dumfries	...	...	2
Kilmarnock	...	...	5	Dunbarton	...	...	7
Paisley	...	...	7	Fife	...	...	5
				Midlothian	...	...	1
				Perth	...	...	1
Corporation of Greenock			16	Renfrew	...	...	34
				Total	...	...	100

Of the 212 patients who were discharged or who died during the period, 157 were treated in the Thoracic Unit, while the remaining 55 were discharged from the Sanatorium Wards. Of that number, 2 proved to be non-tuberculous, one being a case of Bronchiectasis, and the other of Bronchial Carcinoma. A third was discharged with the diagnosis of Tuberculosis not proven. These 3 cases, and also that of a patient who was admitted temporarily to allow his family to remove to another part of the country and on whom no investigations were carried out, are not included in the statistics given below.

NATURE OF DISEASE.

Of the 51 cases of Pulmonary Tuberculosis under consideration 12 had the following complications, viz.:—

Adenitis	...	...	1	Tuberculosis of Abdomen	...	1
Amyloid Disease	...	...	1	Tuberculosis of Abdomen		
Ascites	...	...	1	and Larynx	...	1
Diabetes Mellitus	...	...	1	Tuberculosis of Bone	...	2
Ischio Rectal Abscess	...	...	1	Tuberculosis of Brain	...	1
Rheumatoid Arthritis	...	...	1	Tuberculosis of Larynx	...	1

ADMITTED.					DISCHARGED.			
BY					BY			
	Direct.	Transfer.	Total.		Direct.	Transfer.	Death.	Total.
Men	27	9	36	24	1	11	36
Women	...	13	—	13	11	—	2	13
Boys	...	1	—	1	—	—	1	1
Girls	1	—	1	—	—	1	1
		42	9	51	35	1	15	51

AGE AND SEX DISTRIBUTION.

Quinquennial Periods.		Males.	Females.	Both Sexes.	Age Groups.
Under 5	...	—	—	—	Pre-School Age.
„ 10	...	1	—	1	} School Age.
„ 15	...	—	1	1	
„ 20	...	5	4	9	} Adolescence.
„ 25	...	10	4	14	
„ 30	...	10	3	13	} Early Maturity.
„ 35	...	2	—	2	
„ 40	...	1	—	1	
„ 45	...	2	1	3	} Late Maturity.
„ 50	...	5	1	6	
„ 55	...	1	—	1	
Total	...	37	14	51	

RESULTS OF TREATMENT.

Stage.	Number of Patients.	T.B. present.	Quiescent.	Improved.	No Change.	Worse.	Died.
I. ...	7	2	1	6	—	—	—
II. ...	5	4	—	4	—	1	—
III. ...	39	36	—	17	4	3	15
Totals ...	51	42	1	27	4	4	15

Forty-five per cent. of the patients discharged showed no change, became worse, or died, while 55 per cent. left the hospital with their health improved.

Eighty-two per cent. of the patients had tubercle bacilli in their sputum.

DURATION OF RESIDENCE.

Stage.	Under 4 weeks.	4 and under 13 weeks.	13 and under 26 weeks.	26 and under 52 weeks.	52 weeks and over.	Average duration of stay in days.
I. ...	—	—	2	2	3	334
II. ...	—	—	2	2	1	252
III. ...	3	5	7	3	21	436
Totals ...	3	5	11	7	25	

WASSERMANN TEST.

A specimen of blood was taken from all adult patients on admission, with the exception of gravely ill cases. The result in each case was negative.

THORACIC UNIT.

During the period 1st January to 4th July, 1948, 157 patients were treated in the beds allocated to the Local Authority for their own use and the use of Outside Authorities. Of these, 115 were adult females, 40 were adult males, and 2 were boys. Ten were temporary transfers from other County of Lanark Sanatoria for A.P. Induction. The following surgical treatments were carried out :—

Adhesion Section ...	61	Phrenic Crush ...	83
Aspiration ...	100	Rib Resection ...	1
Bronchoscopy ...	1	Thoracoscopy ...	9
Exploration of Sinus ...	3	Thoracoplasty ...	64

EYE CLINIC.

Dr. Mortimer, Eye Specialist, visited the hospital on four occasions and examined 18 patients, 15 of whom were recommended to have spectacles.

DENTAL CLINIC.

Mr. Gibson, Dental Surgeon, paid regular fortnightly visits to the hospital, giving treatment to 61 patients as follows :—

Examinations ...	24	Impressions taken ...	24
Extractions ...	134	Repairs to Dentures ...	1
Fillings ...	36	Scalings ...	9
Fittings of Dentures ...	23	Treatments of Gums ...	2

Eleven patients were supplied with Dentures under the Tuberculosis Scheme.

THROAT AND NOSE CLINIC.

Dr. Gray visited the hospital at monthly intervals, and examined 84 cases.

ARTIFICIAL PNEUMOTHORAX AND PNEUMOPERITONEUM.

Including inductions and refills :—

In-patients ...	820
Out-patients ...	296

X-RAY DEPARTMENT.

Chest :—	In-patients ...	337
	Out-patients ...	638
Chest Tomographs :—	In-patients ...	4
	Out-patients ...	—
Bone :—	In-patients ...	20
	Out-patients ...	—
Lipiodol Injections :—	In-patients ...	1
	Out-patients ...	—
Films used :—	In-patients ...	380
	Out-patients ...	650
Total films used ...		<u>1,030</u>

PHYSIOTHERAPY DEPARTMENT.

Out-patients:

Ultra Violet Light	...	...	...	...	4	Treatments
Exercises	...	...	...	...	22	„
Total					26	Treatments

In-patients:

Ultra Short-wave Therapy	...	...	...	...	1	Treatment
Kromayer Lamp	...	...	...	...	1	„
Exercises and Massage	...	...	...	...	1,936	Treatments
Infra Red Ray	...	...	...	...	49	„
Total					1,987	Treatments

LABORATORY.

Sputum.

Direct examinations for B. Tuberculosis	...	...	...	...	2,389
Cultures for B. Tuberculosis	...	...	...	...	238
General Bacteriological Examinations	...	...	...	...	48

Pus.

Direct Examinations for B. Tuberculosis	...	...	...	...	90
Aerobic Cultures	...	...	...	...	174
Anaerobic Cultures	...	...	...	...	18

Urine and Faeces.

Direct Examinations for B. Tuberculosis	...	...	...	...	46
Examinations for Organisms of Dysentery and Enteric Groups	...	...	...	...	31
General Bacteriological Examinations of Urine	...	...	...	...	368

Urine.

Microscopical Examinations	...	...	...	...	894
Examinations for Bile	...	...	...	...	6
Examinations for Urobilinogen	...	...	...	...	7
Examinations for Bile Salts	...	...	...	...	5
Examinations for Urobilin	...	...	...	...	8

Faeces.

Microscopical Examinations	...	...	...	...	32
Benzidine Tests	...	...	...	...	161

Cerebro-Spinal Fluid.

Bacteriological Examinations	...	...	...	...	9
Cell Counts	...	...	...	...	37
Protein Examinations	...	...	...	...	36
Globulin Estimations	...	...	...	...	5
Sugar Estimations	...	...	...	...	14
Chloride Estimations	...	...	...	...	19

Pleural and Peritoneal Fluids.

General Bacteriological Examinations	...	...	...	148
Examinations for B. Tuberculosis	...	...	...	118

Throat, Nose and Ear Swabs.

Examinations for B. Diphtheriae, Vincent's Organisms and Haemolytic Streptococci	269
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Vaginal and Urethral Smears, etc.

Examinations for Gonococci	24
----------------------------	-----	-----	-----	----

Conjunctival Smears.

General Bacteriological Examinations	3
--------------------------------------	-----	-----	-----	---

Blood.

Blood Sedimentation Rates	2,380
Mean Corpuscular Volumes	...	...	...	16
Red Cell Counts	...	...	...	141
White Cell Counts	...	...	...	212
Differential Leucocyte Counts	...	...	...	172
Platelet Counts	...	...	...	12
Reticulocyte Counts	...	...	...	31
Haemoglobin Estimations	...	...	...	279
Films Examined for Malaria Parasites	...	...	...	9
Sternal Marrow Biopsies	...	...	...	6
Blood Cultures	...	...	...	18
Blood Grouping Tests	...	...	...	251
Widal Reactions	...	...	...	15
Syphilis Flocculation Test (Sachs Georgi Method)	...	...	...	386
Syphilis Flocculation Test (Kahn Method)	...	...	...	390

Biochemistry.

Blood Sugar Estimations	...	...	...	86
Blood Urea Estimations	...	...	...	171
Icteric Indices	...	...	...	10
Van den Bergh Reactions	...	...	...	4
Plasma Protein Estimations	...	...	...	81
Blood Cholesterol Estimations	...	...	...	39
Serum Bilirubin Estimations	...	...	...	3
Blood Chlorides	...	...	...	3
Blood Calciums	...	...	...	14
Plasma Phosphatase	...	...	...	28
Blood Uric Acid	...	...	...	2
Serum Sodium	...	...	...	2
Serum Potassium	...	...	...	1
Prothrombin Estimations	...	...	...	17
Estimation of Protein to Pleural Fluids	...	...	...	9

Miscellaneous.

Penicillin Sensitivity Tests	...	...	...	...	127
Coagulase Tests (Staphylococcus Aureus)	...	...	...	...	127
Bacteriostatic Tests	...	...	...	...	—
Urea Concentration and Urea Clearance Tests	...	...	...	...	41
Hippuric Acid Liver Function Tests	...	...	...	...	9
Gastric Analyses	...	...	...	...	92
Cold Agglutination Reactions	...	...	...	...	1
Cephalin Cholesterol Flocculation Tests	...	...	...	...	7
Estimation of Diastatic Index	...	...	...	...	—
Estimation of Basal Metabolic Rate	...	...	...	...	25
Estimation of Vitamin C	...	...	...	...	13
Estimation of Chlorides in Urine	...	...	...	...	3

Total ... 10,430

STAFF.

The Medical Staff was as follows :—

Physician-Superintendent.	Assistant Consultant Thoracic
Deputy Physician-Superintendent.	Surgeon.
Bacteriologist.	Consultant Anaesthetist.
Radiologist.	Consultant Dentist.
4 House Officers (Part-time).	Consultant Laryngologist.
Consultant Thoracic Surgeon.	Consultant Ophthalmologist.

The Institution Staff included the following ;—

Matron	...	...	...	1	Maids	...	...	...	30
Assistant Matrons	...	...	...	7	Kitchen Porters	...	...	...	2
Radiographer	...	...	...	1	Laundress	...	...	...	1
Assistant Radiographer	...	...	...	1	Clerks	...	...	...	3
Physiotherapists	...	...	...	3	House Steward	...	...	...	1
Sisters	...	...	...	18	Engineers	...	...	...	3
Trained Nurses	...	...	...	22	Boiler Firemen	...	...	...	6
Assistant Nurses	...	...	...	18	Attendant	...	...	...	1
Probationers	...	...	...	15	Porter	...	...	...	1
Male Nurses	...	...	...	27	Telephonists	...	...	...	3
Ward Orderlies	...	...	...	43	Chauffeurs	...	...	...	2
Kitchen Superintendent	...	...	...	1	Carter	...	...	...	1
Cook	...	...	...	1					

Total ... 212

Colony Departments.

POULTRY FARM.

The production of eggs and fowls for light diet was, as usual, the main function of this Department. Produce supplied to the Institution in this period was as follows :—

Eggs—2,253 doz. Fowls—1,082 lbs.

The stock at the end of the period was as follows ;—

321 Chickens.	36 Ducks.	260 Pullets.
226 Hens.	35 Guinea Fowl.	104 Turkeys.

The Staff consisted of :—

Poultry Manageress	...	...	...	1
Assistants	...	...	...	2

PIGGERY.

The total sales of the Department during this period amounted to £1,570, and the stock at the end of the period numbered 148.

FARM.

The acreage of Farm Crops and Pasture Land during the period was as follows :—

Oats	...	...	27 acres	Mashlam	...	...	9 acres
Wheat	...	...	2 „	Potatoes	...	...	7 „
Rough Grass	...	...	15 „	Turnips	...	...	9 „
Hay	...	...	33 „	Pasture Land	...	102 $\frac{1}{4}$	„
Total							...	204 $\frac{1}{4}$ acres

Livestock at the close of the period was as follows :—

Stock Bulls	...	...	3	Bull Stirks	...	...	2
Heifer Calves	...	...	19	Heifers	...	...	36
Bull Calf	...	...	1	Working Horses	...	...	7
Cows	...	...	50				

The Staff consisted of :—

Farm Manager	...	...	1	Ploughmen	...	...	2
Byreman	...	...	1	Horsemen	...	...	2
Assistant Byreman	...	...	1	Tractorman	...	...	1
Dairymaid	...	...	1	Outdoor Workers	...	...	7

In addition, several casual workers were employed on occasions during the period, on seasonal work.

GARDENS.

This Department was principally concerned with the supply of vegetables, tomatoes, etc., for the Institution. During this period garden produce sold to the Institution amounted to £386.

The Staff of the Gardens and Grounds Departments consisted of :—

Head Gardener	...	...	1	Foreman Gardener			
Inside Foreman Gardener	...	...	1	(Nursery)	...	...	1
Outside Foreman Gardener	...	...	1	Assistant Gardeners	...	...	9
				Carter	...	...	1

COUNTY SANATORIUM, LONGRIGGEND, to 4th July, 1948.

Physician-Superintendent—L. J. LANG, M.B., Ch.B., D.P.H.

Visiting Physician—S. SCOLLER, M.B., Ch.B.

Matron—Miss H. E. SMART.

ADMISSIONS AND DISCHARGES.

In Residence 1st January.	Admitted.	Discharged .	Died.	In Residence 4th July, 1948.
33	32	27*	4	34

* Includes 12 temporarily transferred to Hairmyres and 1 to Stonehouse Hospital.

				Classification of Disease.			
Age Group.	M.	F.	Total.		Pul- monary.	Non-Pul- monary.	Non- Tuber- suspect. culous.
—5	2	1	3	Pre-School ...	1	—	1
—10	—	1	1	School Age ...	1	—	—
—15	—	1	1		—	—	1
—20	—	3	3	Adolescent ...	3	—	—
—25	—	4	4		4	—	—
—30	—	1	1	Early Maturity	1	—	—
—35	—	3	3		3	—	—
—40	—	1	1	Late Maturity	1	—	—
—45	—	—	—		—	—	—
—50	—	1	1		1	—	—
—55	—	—	—		—	—	—
	2	16	18		15	—	2

DURATION OF RESIDENCE IN MONTHS.

	0—1	1—3	—6	—9	—12	—18	—24	Over 24
Pulmonary ...	—	1	3	4	—	3	2	2
Non-Pulmonary ...	—	1	—	—	—	—	—	—
Suspect ...	—	—	—	1	—	—	—	—
Non-Tuberculous ...	—	—	—	1	—	—	—	—

Pulmonary Tuberculosis.

(15 Cases.)

Of these, 2 cases were in children under 10 years, both were discharged well and both had been contacts with open cases.

The remaining patients had parenchymatous disease. The majority were, on admission, cases of chronic disease with lesions of varying extent and degrees of advancement. Many were suitable only for conservative treatment. Collapse therapy and other special measures were used when indicated.

Sixty-six per cent. of the verified cases had tubercle bacilli in the spit.

GENERAL RESULTS OF TREATMENT.

Classification on Admission.	Quiescent.	Improved.	Stat.	Worse.	Died.
Group I.	6	2	—	—	—
Group II.	—	2	—	—	—
Group III.	—	3	1	—	4

Non-Tuberculous Diseases.

In 1 case, a child of 2 years, a diagnosis of convalescent bronchopneumonia was made. He was discharged well after 187 days' treatment.

SPECIAL EXAMINATIONS AND TREATMENT.

Artificial Pneumothorax and Pneumoperitoneum.—Inductions were carried out at Hairmyres. Mr. Dick carried out adhesion section in 1 case and Phrenic Crush in 5.

During the period 14 cases were under treatment and 185 refills were given. Of these 126 were pneumoperitoneum refills.

Thoracoplasty.—One patient had thoracoplasty performed and was temporarily transferred to Hairmyres to the Thoracic Unit for this treatment.

Myocrisin.—During the period 1st January to 4th July, inclusive, 2 patients had full courses of myocrisin injections.

Lumbar Punctures.—One lumbar puncture was carried out to relieve intracranial pressure in a patient who later died.

X-ray Examinations.—Ninety-six X-ray examinations were carried out at various County X-ray Units. The staff have routine examinations every six months.

Ear, Nose and Throat Specialist.—Six patients visited the Ear, Nose and Throat Specialist at the Clinic at County Hospital, Motherwell.

Eye Specialist.—Five patients were examined by the Eye Specialist at the County Hospital, Motherwell.

Dental Treatment.—The visiting dentist paid five visits and treated 18 patients. The total number of extractions were 12 and 1 filling was done. Nine patients had inspections only. All treatment was carried out in the hospital.

ADMINISTRATION.

Building and Grounds.—Iron canopy removed from over boilers in kitchen. Tennis court repaired.

Accommodation. 48 beds and 6 cots for observation.

STAFF.

<i>Medical Staff</i>	...	Physician-Superintendent (Visiting). 1 Visiting Physician. 1 Resident Medical Officer.
<i>Nursing Staff</i>	...	Matron. 2 Sisters. 2 Staff Nurses 2 Assistant Nurses. 2 Probationers. 1 Part-time Probationer.

There has been during the period continued difficulty in obtaining suitable nursing staff and the number of occupied beds has had to be reduced.

<i>Domestic Staff</i>	...	Cook. 2 Laundry Maids. 14 Maids.
<i>Outdoor Staff</i>	...	1 Engineer Attendant. 2 Gardener Firemen.

COUNTY SANATORIUM, SHOTTS, to 4th July, 1948.

Physician-Superintendent—W. EDWARD WHYTE, M.B., Ch.B., D.P.H.*Visiting Physician*—J. A. MOORE HALL, M.D.*Resident Medical Officer*—CHRISTINA C. CHRISTIE, M.B., Ch.B.*Matron*—Miss ROBBIE.

ADMISSIONS AND DISCHARGES.

In Residence 1st January.	Admitted.	Discharged.	Died.	In Residence 4th July.
31	24	23	3	29

Of the discharges during the above period 10 were temporary transfers to Hairmyres Hospital for treatment.

Deducting the number of temporary transfers from the number of total discharges leaves a nett total of 13 discharges and 3 deaths. The subsequent statistics deal with the total of 16.

AGE GROUPS.

In the following table the cases are shown classified according to age and age-groups. All 16 cases were females, and no male patients were admitted during the period under review.

Quinquennial Periods.	Age.	Females.	Pulmonary.
—5	—	—	—
—10	School age	—	—
—15		—	
—20	Adolescent	4	4
—25		5	
—30		2	
—35	Early	4	11
—40	Maturity	1	1
—45		—	
—50		—	
—55		—	
—60		—	
—65		—	
—70		—	
		16	16

DURATION OF RESIDENCE IN MONTHS.

			0—1	1—3	—6	—9	—12	—18	—24	Over 24
Pulmonary	—	1	2	6	2	3	1	1

Pulmonary Tuberculosis.

All 16 patients who were discharged or who died during the period suffered from parenchymatous tuberculosis. 69 per cent. of these cases had tubercle bacilli in the sputum or gastric juice. 56 per cent. of the patients, on admission, were suffering from chronic disease, and many of them were in poor general condition and had very extensive lesions.

In suitable cases, collapse therapy and other special treatment measures were used when indicated.

GENERAL RESULTS OF TREATMENT.

Classification on Admission.			Quiescent.	Improved.	Stat.	Worse.	Died.
Group I.	...	...	1	1	—	—	—
Group II.	...	...	2	3	—	—	—
Group III.	...	...	—	3	2	1	3

SPECIAL EXAMINATIONS AND TREATMENT.

Artificial Pneumothorax.—Inductions of Artificial Pneumothorax were carried out at Hairmyres Hospital, and Mr. Bruce Dick performed adhesion section in 1 case.

Seven patients had successful Artificial Pneumothorax inductions performed; 1 Artificial Pneumothorax induction was unsuccessful; 131 refills of Artificial Pneumothorax were given.

Pneumoperitoneum.—2 Phrenic Crush operations, followed by induction of Pneumoperitoneum, were performed at Hairmyres Hospital. Seventy-four Pneumoperitoneum refills were given.

Thoracoplasty.—One patient was transferred to Hairmyres Hospital where two-stage Thoracoplasty was performed.

Mr. Bruce Dick's Clinic.—Seven patients paid 9 visits to this Clinic at the County Hospital, Motherwell.

Paracentesis Thoracis.—Two patients had pleural fluid aspirated.

Myocrisin Treatment.—Three patients had courses of myocrisin given; of these 2 had abbreviated courses owing to adverse reactions.

X-ray Examinations.*X-rays of Chest:—*

116 X-ray examinations were carried out at various County X-ray Units.

1 Dental X-ray examination was carried out at Cleland.

SPECIAL CLINICS.

Ear, Nose and Throat Clinic.—Seven patients had 9 attendances at the Ear, Nose and Throat Clinic in the County Hospital, Motherwell.

Eye Clinic.—Five patients attended this Clinic at the County Hospital, Motherwell, and 12 visits were paid.

Dental Treatment.—The visiting Dental Surgeon paid 22 visits and treated 29 patients. The total number of extractions was 29, and 15 fillings were done. Four patients' teeth were scaled. Fifteen impressions were taken.

Two complete upper and lower dentures were supplied.

One lower denture only and 6 partial dentures were supplied.

ADMINISTRATION.

Buildings and Grounds.—Necessary repairs were carried out in the wards and administration block as required.

Accommodation.—There is still great difficulty in obtaining sufficient nursing staff, and as a result one of the pavilions is still closed.

Two pavilions were in use at the end of the period with accommodation for 30 patients.

STAFF.

Medical Staff ... Physician-Superintendent.
Visiting Physician.
Resident Medical Officer.

Nursing Staff ... One Matron.
One Full-time Sister.
One Part-time Sister.
One **Staff** Nurse.
One Assistant Nurse.
Six Probationer Nurses.
One Part-time Nurse.

Domestic Staff ... One Cook.
One Assistant Cook.
Two Laundry Maids.
Nine Full-time Maids.
Five Part-time Maids.

Outdoor Staff ... One Engineer Attendant.
One Assistant Gardener.
One Stoker-Boilerman.

COUNTY HOSPITAL, LANARK.

Visiting Physician-Superintendent—Dr. J. ALLISON.

Sister-in-Charge—Miss M'QUADE.

The hospital continues to admit cases under Maternity and Child Welfare Scheme. The vast majority of cases required only good food and rest away from home worries. There was a marked improvement in physical and mental outlook in the majority of cases.

ADMISSIONS AND DISCHARGES.

In residence 1st January.	Admitted.	Discharged.	Died.	In residence 31st December.
—	186 (M.86 : C.100)	164 (M.74 : C.90)	—	22 (M.12 : C.10)

DURATION OF RESIDENCE IN DAYS.

0-1	1-3	—6	—9	—12	—18	—24	24+
—	20	30	11	18	60	10	15

GENERAL RESULTS OF TREATMENT.

Improved.	Stat.	Worse.	Died.
139	21	(M.1: C.3)	—

CONDITIONS FOUND.

MOTHERS.

Post-natal debility	...	...	...	41
Post-natal anaemia	...	...	...	5
General debility	...	...	...	26
Post-operative debility	...	...	...	4
Ante-natal debility	...	...	...	6
Chronic endocarditis	...	...	...	2
Hyperthyroidism, anxiety state			...	1
Aplastic anaemia	...	...	...	1

ABNORMAL CONDITIONS FOUND IN CHILDREN.

- (1) Chicken Pox 2 Discharged home.
- (2) Measles 1 Transferred to Roadmeetings Hos-
pital.
- (3) Hydrocephalus and
Spina bifida 1

Buildings.

No major alterations or renovations were carried out.

Staffing.

In addition to Matron, the staff at end of year consisted of 8 nurses, 5 maids, 2 part-time maids, 1 cook, and 1 gardener.

COUNTY MATERNITY HOSPITAL, BELLSHILL.

Period 1st January, 1948, to 4th July, 1948.

At the beginning of the year 87 patients were resident in hospital, of whom, 41 were babies. Admissions up to 4th July, 1948, were 1,729 of whom 940 were adults. There were 789 babies of whom 42 were born before admission, 34 were transfers and 45 were stillborn.

On the 4th July, 92 patients remained in hospital, of whom 43 were babies.

The Report deals with the following discharges up to 4th July, 1948 :—

				1948
(1) Delivered at or near full term	...	...	...	695
(2) Delivered before admission	...	...	...	42
(3) Discharged undelivered	...	...	...	170
(4) Cases of Abortion	...	...	...	12
(5) Gynaecological	...	...	...	3
(6) Babies born alive and babies transferred from district or other institutions	...	...	...	744

TABLE SHOWING ADMISSIONS AND DISCHARGES FROM 1ST JANUARY,
1948, TO 4TH JULY, 1948.

	In Residence 1/1/48	Admitted	Dis- charged	Died	In Residence 4/7/48
Antenatal	17	170	166	1	20
Confinement	29	695	694	2	28
Postnatal	—	42	41	—	1
Abortion	—	12	11	1	—
Gynaecological	—	3	3	—	—
Babies born alive	41	744	658	43	43
	87	1,666	1,573	47	92

Maternal Deaths.**1st January, 1948—4th July, 1948.**

The maternal mortality was 4.25 per thousand (4 deaths) for all adult admissions, or 6.06 per thousand live births, within the hospital.

The causes of death were as follows :—

Death during anaesthesia	...	...	...	...	1
Pulmonary embolism in antenatal case	...	...	...	...	1
Pre-eclamptic Roxaemia with toxic jaundice	...	...	...	...	1
Chronic Nephritis	...	...	...	...	1

A—Cases under antenatal supervision i.e., bed booked.

B—Unbooked admissions.

Babies treated in the Nursery.**1st January, 1948—4th July, 1948.**

There were 148 babies treated in the Nursery during 1948 of whom 34 were babies transferred from district or other institutions.

There were 38 deaths in the nursery during the period.

Cases treated in the nursery have been classified as follows :—

Premature babies	...	...	...	...	...	102
Forceps deliveries	...	...	...	...	...	14
Caesarean Section babies	...	...	...	...	...	3
Breech presentation babies	...	...	...	...	...	2
Asphyxia	...	...	...	...	...	6
Cyanosis	...	...	...	...	...	7
Atelectasis	...	...	...	...	...	4
Icterus gravis neonatorum	...	...	...	...	...	5
Infection	...	...	...	...	...	2
Persistent vomiting	...	...	...	...	...	3
Miscellaneous	...	...	...	...	...	—
						<u>148</u>

Nature of the case.	Reg. No.	Age.	Parity.	Category.	Maturity Months.	Pyrexia or Sepsis.	Child.
Ruptured right tubal pregnancy. Itriperitoneal haemorrhage. Cardiac failure death under anaesthesia.	24	31	2	" B "	1½	—	Abortion.

Previous Health.—No details available.

Previous Pregnancy.—One full-time pregnancy giving rise to mature, alive child.

Patient admitted at 11 p.m. on 3rd January, 1948, as an Abortion to Calderbank House. The patient was transferred at 2.30 a.m. to Bellshill Hospital as a diagnosis of ruptured Ectopic Pregnancy with profound shock. On admission, resuscitation measures were immediately commenced. Plasma and blood were given intravenously. The patient's condition did not improve. Operation was deemed necessary and this was commenced at 4.50 a.m., the anaesthetic being given by a specialist anaesthetist. On opening the abdomen the diagnosis of Ruptured Ectopic Pregnancy was confirmed and a right salpingo-cophorectomy was performed. As the operation was being completed the patient collapsed and died. Resuscitation measures in a form of cardiac stimulation and artificial respiration were without avail.

Death was primary due to cardiac failure while under anaesthesia during operation for a right side ruptured tubal pregnancy with severe intra-peritoneal haemorrhage.

Nature of the case.	Reg. No.	Age.	Parity.	Category.	Maturity Months.	Pyrexia or Sepsis.	Child.
Chronic nephritis. Acute pulmonary oedema. Right Lobar pneumonia. Congestive cardiac failure.	375	31	2	" A "	8	—	Alive.

Previous Health.—No details available.

Previous Pregnancy.—One full-time pregnancy giving rise to a mature alive child.

History of present condition. The patient was hospitalised on two previous occasions during this pregnancy with hypertension, profuse albuminuria and oedema. Investigations carried out were inclined to indicate a degree of kidney damage of old standing and a diagnosis of chronic nephritis was made. The patient was again admitted in March, 1948, as antepartum haemorrhage. There was a small amount of vaginal loss on admission. The blood pressure was 150/110 and there was albumen present in the urine. The foetal heart could easily be heard. The next day, the 16th March, 1948, the patient started labour and easily delivered herself of a live, premature child.

On the third day of her puerperium the patient developed acute pulmonary oedema and cardiac dilation. This was followed by a right lobar pneumonia. She became progressively more drowsy and died on 29th March, 1948, of congestive cardiac failure.

Post mortem revealed chronic glomerulo—nephritis, cardiac dilation and hypertrophy consolidation and oedema of both lungs.

Nature of the case.	Reg. No.	Age.	Parity.	Category.	Maturity Months.	Pyrexia or Sepsis.	Child.
Pre-eclamptic Toxaemia. Toxic jaundice.	689	22	Prim.	" B "	F.T.		Stillborn.

Previous Health.—Diphtheria " Rheumatics " at 9 years.

This patient had been treated at home for pre-eclamptic toxaemia for a month prior to admission. On admission the patient a dehydrated jaundiced young woman, B.P. 160/90 urine contained albumen and bile. Labour commenced and continued uneventfully till the morning of the 15th May, when it was noted that the maternal pulse had risen to 160 and the blood pressure had suddenly fallen to 100/60. The patient was delivered by forceps and died in coma the following day.

Certified cause of death.—Toxic Jaundice, Pre-eclamptic Toxaemia.

Nature of the case.	Reg. No.	Age.	Parity.	Category.	Maturity Months.	Pyrexia or Sepsis.	Child.
Pulmonary Embolism from femoral thrombosis.	791	25	3	" A "	B	—	Un-delivered.

Previous Health.—No details available.

Previous Pregnancies.—Two pregnancies full time giving rise to mature, alive children. Pleurisy during second pregnancy. Phlebitis in puerperium of both.

The patient was well during her pregnancy until the sixth month of pregnancy when she complained of pain in her left calf. This occurred intermittently till the patient was admitted to hospital on 31st May, 1948, when she was admitted as a case of femoral thrombosis. The condition was treated by conservative methods. Death occurred on 17th June, 1948, as a result of a pulmonary embolism following femoral thrombosis. This was confirmed by postmortem findings.

CALDERBANK HOUSE

Annual Report for the year 1st January to 4th July, 1948.

TABLE II.

Classified Cases.	In Residence on 31st December, 1947	Ad-missions until 4th July, 1948	Dis-charges until 4th July, 1948	Deaths.	In Residence on 4th July, 1948
Post-Natals ...	7	260	263	—	4
Transferred					
Post-Natals ...	—	3	3	—	—
Direct					
Confinements ...	—	1	1	—	—
Abortions ...	8	174	173	—	9
Gynaecological cases	—	5	3	—	2
Antenatals ...	—	12	11	—	1
Babies Live born in Hospital	—	1	1	—	—
Babies admitted ...	6	219	219	2	4
Total ...	21	675	674	2	20

REPORT ON CROSSLAW HOME, LANARK.

For the Year 1948.

Cases are sent in here from the various Burghs and districts of the upper ward of Lanarkshire, and are kept here until ready for confinement when they are sent to Bellshill Maternity Hospital as we have no accommodation for such cases here. They are mostly vagrants or women working on farms or other places and have nowhere else to go. After confinement and the usual time for convalescence they are generally sent back here and kept until they are ready for work again. Children are sent to Dunavon House or Smyllum Orphanage or sometimes private houses if the people are willing to adopt them.

Any cases of infectious disease are sent to the various Fever Hospitals or Clinics as we cannot keep them here.

Men and women sent in from the roads where they have been on tramp or sent in from houses where they cannot be attended to. Many of the tramps are footsore and tired requiring a few day's rest. After a few days, some of them may do a little work about the place, but some won't work. All are soon wearying to get back on to the roads again. The cases sent in from their homes are often very ill, some with bed-sores, so that they require a good deal of nursing. Others are suffering from Cerebral Haemorrhage with Paralysis requiring long and strict attention. Others are sent in because they are left all alone and can get no one to attend to them, while a few require a major operation and are sent to Edinburgh or Glasgow or Law Hospitals for the necessary attention.

Food Supplies.

MILK.—We have plenty of good sweet milk sent in from a neighbouring farm.

MEAT AND OTHER FOODS.—We give the patients a very good variety of food, viz., porridge, soups, milk puddings, mince, eggs, etc. These are all well cooked and seem to be enjoyed. I see no signs of food adulteration nor any cases of food poisoning.

Patients and inmates seem well nourished except the serious cases who cannot take food.

WATER SUPPLY AND DRAINAGE.—We have an abundant supply of good water. Baths, hand basins and w.c's. are in adjacent apartments to the wards. All parts of the Home are heated by means of hot water pipes. Being a fairly old place the drainage pipes require occasional overhauling so that the drainage system is kept in good working order.

We have no fire escape.

On the whole the Home has been well run by the staff, although at times we have been understaffed especially in nursing.

THOMAS W. BANKS,
Medical Officer

NATIONAL HEALTH SERVICE (SCOTLAND) ACT, 1947.

Section 22.

(1) It shall be the duty of every local health authority to make arrangements for the care, including in particular dental care, of expectant and nursing mothers and of children who are not attending a school under the management of an education authority and who have not attained, or are deemed under Section 33 of the Education (Scotland) Act, 1946, not to have attained, the age of five years.

(2) Where the aforesaid arrangements provide for the supply of anything that may be prescribed, not being a drug, a medicine, or an appliance of a type normally supplied, the local health authority may recover from any person so supplied such charge as the authority may determine having regard to the cost of supply :—

Provided that the authority may remit the said charge in whole or in part if in the circumstances of any particular case they consider it reasonable to do so.

(3) A local health authority may, with the approval of the Secretary of State, contribute to any voluntary organisation including among its objects any of the purposes mentioned in subsection (1) of this Section.

PROPOSALS FOR THE CARE OF MOTHERS AND YOUNG CHILDREN.

1. GENERAL.

The local health authority will make provision in their area for the care of expectant and nursing mothers and of children under school age not covered by the school health service. The facilities will embrace those set forth below, in addition to which arrangements will be made with the Regional Hospital Board whereby such cases in the following groups—coming within the scope of the present scheme—as require specialist advice and treatment will be referred from the local health authority's clinics, and practitioners if they so desire, e.g. :—
 (a) ear, nose and throat; (b) ophthalmological; (c) anaemia; (d) diabetes; (e) paediatric; (f) orthopaedic; (g) phimosis and hernia; (h) birth control (on medical grounds); and (i) debilitated mothers and children requiring convalescent treatment.

Educational facilities will be continued and include the teaching of mothercraft, the delivery of lectures and talks on health or disease and

the exhibition of related films; demonstrations in dressmaking and cookery will also be given.

Records will be kept of all cases attending the local authority's clinics. Arrangements will be made with the Regional Hospital Board for the interchange of such information as is necessary between appropriate clinics and linked hospitals.

By arrangement with the Regional Hospital Board, intimation of admissions and discharges at the Maternity Hospitals will be made to the Medical Officer of Health.

2. CONTROL AND SUPERVISION.

The general control and supervision of the service will be directed by the Medical Officer of Health who may depute to his assistant such duties as he considers desirable.

3. CLINICS.

(i) *Ante-natal Clinics*.—The number of ante-natal clinics established is 7 with 9 weekly sessions. They are held as follows :—

Baillieston	...	...	...	1 session per week.
Bellshill	...	...	...	3 sessions per week.
Blantyre	...	...	...	1 session per week.
Cambuslang	...	...	...	1 session per week.
Lanark	...	...	...	1 session per week.
Larkhall	...	...	...	1 session per week.
Shotts	...	...	...	1 session per week.

These have been staffed by obstetricians, that is to say medical practitioners whose practice is confined to obstetrics or obstetrics and gynaecology or who are Fellows or Members of the British College of Obstetricians and Gynaecologists and by a Doctor and nursing staff from the maternity hospital, and arrangements will be made with the Regional Hospital Board to ensure that the service to be operated on and after 5th July, 1948, will be at least as efficient as the existing service. The clinics will be open to all women irrespective of whether they desire to be confined in hospital or at home—if the latter they will be referred by their own doctor or midwife.

As and when suitable premises are found or can be provided and the necessary staff is available, it is proposed to establish additional ante-natal clinics at Airdrie, Bishopbriggs, Cadzow, Carluke, Chryston, Lesmahagow and Newmains.

(ii) *Post-natal Clinics* will be held at the following centres :—

Bellshill	...	...	...	...	1 session per week.
Cambuslang	...	...	...	...	1 session per fortnight.
Baillieston	...	...	...	...	1 session per month.
Blantyre	...	...	...	...	1 session per month.
Lanark	...	...	...	...	1 session per month.
Larkhall	...	...	...	...	1 session per month.
Shotts	...	...	...	...	1 session per month.

Staffing requirements as for the ante-natal clinics above.

As and when suitable premises are found or can be provided and the necessary staff is available, it is proposed to increase the number of sessions at certain of the foregoing clinics if required and to establish additional clinics at Airdrie, Bishopbriggs, Cadzow, Carluke, Chryston, Lesmahagow and Newmains.

Arrangements will be made for defaulters at either the ante-natal or post-natal clinics to be notified to the Medical Officer of Health for visitation by the health visiting staff.

(iii) *Child Welfare Clinics*.—There are 20 child welfare clinics, 16 being held weekly and 4 fortnightly, as follows :—

Airdrie	...	...	...	...	2 sessions per month.
Baillieston	...	...	...	...	1 session per week.
Bellshill	...	...	...	...	1 session per week.
Blantyre	...	...	...	...	1 session per week.
Bishopbriggs	...	...	...	...	1 session per week.
Cadzow	...	...	...	...	1 session per week.
Cambuslang	...	...	...	...	1 session per week.
Carluke	...	...	...	...	2 sessions per month.
Chapelhall	...	...	...	...	2 sessions per month.
Chryston	...	...	...	...	1 session per week.
Lanark	...	...	...	...	1 session per week.
Larkhall	...	...	...	...	1 session per week.
Lesmahagow	...	...	...	...	1 session per week.
Newarthill	...	...	...	...	1 session per week.
Newmains	...	...	...	...	1 session per week.
New Stevenston	...	...	...	...	1 session per week.
Shotts	...	...	...	...	1 session per week.
Strathaven	...	...	...	...	2 sessions per month.
Tannochside	...	...	...	...	1 session per week.
Uddingston	...	...	...	...	1 session per week.

The medical staff who will conduct the clinics will be—(a) full-time medical officers of the local health authority ; and (b) general medical practitioners where available, by arrangement with the Executive Council.

By arrangement with the Regional Hospital Board, endeavour will be made, where practicable, to ensure that these medical officers of the local health authority will be enabled to gain experience in a part-time capacity in Children's Wards.

Auxiliary Child Welfare Clinics number 22 and are held fortnightly as follows :—

Auchinloch	...	...	...	2 sessions per month.
Biggar	...	...	...	2 sessions per month.
Bankhead	...	...	...	2 sessions per month.
Blackwood	...	...	...	2 sessions per month.
Bothwellhaugh	...	...	...	2 sessions per month.
Calderbank	...	...	...	2 sessions per month.
Carmyle	...	...	...	2 sessions per month.
Carstairs	...	...	...	2 sessions per month.
Cleland	...	...	...	2 sessions per month.
Coalburn	...	...	...	2 sessions per month.
Douglas	...	...	...	2 sessions per month.
Douglas Water	...	...	...	2 sessions per month.
East Kilbride	...	...	...	2 sessions per month.
Forth	...	...	...	2 sessions per month.
Glenboig	...	...	...	2 sessions per month.
Harthill	...	...	...	2 sessions per month.
Law	...	...	...	2 sessions per month.
Newton	...	...	...	2 sessions per month.
Overtown	...	...	...	2 sessions per month.
Salsburgh	...	...	...	2 sessions per month.
Shettleston	...	...	...	2 sessions per month.
Stonehouse	...	...	...	2 sessions per month.

They are not staffed by medical officers but are in charge of a senior health visitor.

An extension of these auxiliary centres to full status will be considered in agreement with the Executive Council when medical practitioners become available to undertake the duties.

4. PREMATURE INFANTS.

By arrangement with the Regional Hospital Board, nursery accommodation will be made available for premature babies born at home; they will be admitted where possible—and preferably with their mothers.

In respect of premature babies who for any reason cannot be admitted to hospital, the local health authority will provide special equipment on loan where facilities are lacking for adequate care of the child at home, as follows—cot, mattress, blankets, sheets, hot water bottle, baby clothes, night dresses and gamgee suits.

The local health authority will also provide any special food recommended by the medical attendant, or health visitor after consultation with the medical attendant and by arrangement with the Regional Hospital Board breast milk where required.

The local health authority will provide a central store—(cf. Home Nursing proposals) where the above articles will be kept—and will be responsible for the disinfection of the articles after use.

A health visitor with special knowledge of and experience in the care of premature babies who will be itinerant and provided with a car will be appointed to supervise and give advice where premature babies are retained at home.

It is impossible to hazard a date when the hospital facilities will be available.

5. UNMARRIED MOTHERS.

The arrangements which have been made for the admission of unmarried mothers to "Homeland" and St. Gerard's Home, Glasgow, will be continued.

Those who do not wish to avail themselves of this service will be admitted to the maternity hospital by arrangement with the Regional Hospital Board.

The local health authority will—if the demand necessitates it—by arrangement with the Regional Hospital Board, establish a Hostel where unmarried mothers will be admitted for a period of three months before confinement and three months thereafter. The Hostel would not be a special *ad hoc* home but would be adjacent to the maternity hospital. (Cf. para. 9.)

Special but unobtrusive attention will be given to illegitimate babies by the Health Visitor.

6. WELFARE FOODS.

Collaboration will be maintained with the Ministry of Food in connection with the supply of welfare foods included in the Government's Welfare Foods Scheme.

Facilities for the issue of these foods will be arranged for as heretofore by direct liaison between the Medical Officer of Health and the Food Executive Officer.

The distribution of the foods is undertaken at the Child Welfare Centres and in certain rural areas from the homes of the Health Visitors. These are apart from the sessions presently organised by the Ministry of Food.

The local health authority will continue to supply medical comforts such as olive oil, malt preparations, etc., if not available in any other way, if it is considered that these are required in addition to those provided through the Ministry of Food Scheme.

The local health authority will provide at their Health Institutes and Clinics in the populous areas a three-course dinner daily to expectant mothers from the date on which pregnancy is established and to nursing mothers for three months after the date of confinement. Children under 5 years of age will also be supplied with suitable meals provided the mother is eligible under these arrangements.

Meals will also be provided to children attending the day nurseries.

7. ACCOUCHEMENT OUTFITS.

Accouchement outfits will be provided—(cf. proposals on domiciliary midwifery, section 23).

Where, in the opinion of the midwife and doctor, beds and bedding and such articles as the following :—enamel jug, enamel bowls, bed pan, mackintosh (1 large and 1 half size), and baby bath, are required for the confinement and puerperium, these will be provided on loan. It will be expected that all equipment will be handed back in clean condition and adequate provision for their disinfection will be made through the Public Health Department.

8. DAY NURSERIES.

Six day nurseries will be operated, viz. :—

Baillieston.
Bellshill.
Blantyre.
Cambuslang.
Larkhall.
Newmains.

These will be considered fully utilised when there are 20 toddlers and 15 babies provided for.

Consideration will be given to the question of setting up other nurseries as and when practicable provided the demand remains.

9. RESIDENTIAL NURSERIES.

It is proposed to establish one residential nursery accommodating not more than 40. This will not be an *ad hoc* institution but will be run in close association with an existing hospital (preferably at a general hospital with children's wards). It will be staffed by intelligent women of the home-help type experienced in the upbringing of children with daily supervision for health purposes by the matron and/or the superintendent. This nursery will cater for children of parents who for some reason satisfactory to the Medical Officer of Health are *temporarily* unable to look after their families. The arrangements will be in collaboration with the Regional Hospital Board.

10. OTHER PROVISION FOR THE CARE OF CHILDREN.

A "Nannie" service will be organised in such areas as the Medical Officer of Health considers necessary. This will be staffed by girls holding the Nursery Nurses' Certificate who will attend in private homes but, where practicable, will congregate the children in the Health Institutes or other suitable premises for morning, afternoon, or whole day sessions as may be arranged.

The scheme may be extended, when the personnel is sufficient, to allow of any married couples with a family having this service in the evenings up till but not later than 9.30 o'clock.

In view of the facilities provided under para. (8) it is not proposed to make provision for registered daily guardians.

11. DENTAL CARE.

The local health authority will appoint a senior dental officer to co-ordinate all the dental services in the County. Arrangements will be made for each expectant mother and pre-school child over the age of 2 years who may be attending one of the local health authority's clinics or who may be sent there by the family doctor to have their dental condition inspected by the dentist. He will carry out such treatment (including conservative treatment) and provide dentures and such repair of dentures as is considered necessary. This will be done either by full-time dentists of the local health authority or where an arrangement with the Executive Council is reached by dental practitioners payable on a sessional basis.

Until the senior dentist is appointed it is not advisable to give particulars of weekly sessions or the number of dentists required.

12. PROPOSALS FOR REMEDYING DEFICIENCIES.

The following are the proposals for remedying deficiencies so far as these deficiencies can be assessed :—

- (i) The establishment of seven additional ante-natal clinics (para. 3 (i)).
- (ii) Increasing the number of sessions if required at existing post-natal clinics and the establishment of seven additional post-natal clinics (para. 3 (ii)).
- (iii) The stepping-up of the status of auxiliary child welfare clinics (para. 3 (iii)).
- (iv) Arrangements with the Regional Hospital Board for the supply of breast milk for premature infants not removed to hospital (para. 4).
- (v) The establishment of a hostel—if the demand necessitates it—for unmarried mothers (para. 5).
- (vi) The establishment of a residential nursery (para. 9).
- (vii) The appointment of additional dentists and dental attendants (para. 11).

It is not possible to hazard a date when these proposals can be carried into effect, but the local health authority will keep the various services under close review and will develop them along the lines indicated as soon as practicable.

13. ESTIMATED EXPENDITURE TO BE INCURRED DURING THE PERIOD
5TH JULY, 1948, TO 15TH MAY, 1949.

(a) Cost of clinics	...	...	...	...	£18,000
(b) Cost of day nurseries	...	...	...	...	16,000
(c) Cost of residential nurseries	...	...	...	...	Nil
(d) Cost of dental treatment	...	...	...	...	4,500
(e) Cost of special provision on care of unmarried mothers and their children	...	...	...	...	300
(f) Other expenditure—					
Meals to expectant and nursing mothers	£4,000				
Nannies	...	...	...	...	2,000
Propaganda	...	...	...	...	500
				6,500	
					<u>£45,300</u>

Estimated amount of receipts:—

Ante-and post-natal clinics	...	...	...	£6,000
Other services	...	...	...	2,200
				<u>£8,200</u>

Approved at the Monthly Meeting of the County Council of the County of Lanark, held on Wednesday, the Seventh day of July, Nineteen hundred and forty-eight.

(Sgd.) JOHN MANN, *Convener of County Council.*

(Sgd.) JOHN C. CONNOR, *Member of County Council.*

(Sgd.) WM. C. BROWNLIE, *County Clerk.*

Approved by the Secretary of State for Scotland on 14th September, 1948.

(Sgd.) R. HOWAT, *Assistant Secretary,*
Department of Health for Scotland, Edinburgh.

LANARKSHIRE HOUSE,
GLASGOW, C.1.

Proposals for Domiciliary Midwifery Service.

NATIONAL HEALTH SERVICE (SCOTLAND) ACT, 1947.

Section 23.—(1) the local health authority shall be the local supervising authority for the purposes of the Midwives (Scotland) Acts, 1915 and 1927.

(2) It shall be the duty of every local health authority to make adequate arrangements for the provision to women by whom or on whose behalf application is made, of the services in their own homes of certified midwives before and during child-birth and from time to time thereafter during a period not less than the lying-in period, and for that purpose the authority may arrange with Regional Hospital Boards or voluntary organisations employing midwives or they may themselves employ midwives.

In this sub-section the expression "lying-in period" means the period defined as the lying-in period by any rule for the time being in force under Section 5 of the Midwives (Scotland) Act, 1915.

1. EMPLOYMENT OF MIDWIVES.

For the purpose of providing a service of certified midwives to women in their own homes, the local health authority will :—

- (a) employ a staff of whole-time midwives who shall be State Registered Nurses as well as being State Certified Midwives ;
- (b) utilise the services of private practising State Certified Midwives, on a case basis ; and
- (c) enter into an agreement with District Nursing Associations employing State Certified Midwives in the area for the services of Certified Midwives. (The Heads of Agreement are shown in Appendix I.)

Should the maternity hospital in the area be one occupied in the training of medical students and/or pupil midwives, the local health authority will be prepared to co-operate with the Regional Hospital Board regarding facilities for training.

2. CONTROL AND SUPERVISION.

The service will be under the control and direction of the Medical Officer of Health, who shall, where a nurse is undertaking combined duties—midwifery, health visiting and domiciliary nursing—be

responsible for co-ordinating the midwifery, health visiting and home nursing services. This will be achieved by the Medical Officer of Health himself keeping in close touch with the work through regular reports from the supervisors and discussions with them.

Supervision of all practising midwives in the area will be undertaken by :—

- (a) A supervisor and assistant supervisor qualified in terms of Section 2 (c) of the Midwives (Qualifications of Supervisors) Regulations (Scotland), 1937. They shall :—
 - (i) visit midwives in their own homes and in the course of their duties at frequent intervals and at least once every six months and inspect their registers and appliances ;
 - (ii) report to the Medical Officer of Health where any midwives would, in their opinion, benefit by attendance at a residential refresher course or at a course of lectures or demonstrations.
- (b) The Senior Assistant Medical Officer for Child Welfare who shall act in conjunction with the supervisor and her assistant in all matters relating to the clinical practice and professional capabilities of midwives.

3.

GENERAL

Any woman who is to be confined in her own home and by whom or on whose behalf application is made to the local health authority shall be entitled to the services of a midwife before and during child-birth and from time to time thereafter during a period not less than the lying-in period.

Arrangements will be made with the Executive Council (and the Regional Hospital Board) to ensure that the services of doctors will be available—especially for emergency calls from midwives. A list of practitioners undertaking maternity medical services shall be furnished to each midwife undertaking cases on behalf of the local health authority.

Application for the services under these arrangements shall be made in writing on a form to be supplied by the local health authority and obtainable from the Public Health Department, Beckford Street, Hamilton, Medical Practitioners, Health Centres when established, Health Institutes and Child Welfare Centres, and midwives and nurses employed by the local health authority—Appendix III.

These forms are to be forwarded to the Medical Officer of Health (postage prepaid), Public Health Department, Beckford Street, Hamilton.

A woman shall be expected to make application for the services under these proposals as soon as she becomes aware that she is pregnant, and also comply with any instructions or directions given by the practitioner or midwife in regard to treatment or otherwise.

Except where, for administrative or other reasons, choice of a midwife is not practicable, a woman may select any midwife in her area whose services are available under these proposals. If the woman has not secured a midwife to render the services to which she is entitled the local health authority shall assign a midwife to her.

Where a woman, whilst services under these proposals are being provided to her, changes her residence permanently into another area, she shall give notice to the Medical Officer of Health and, on receiving such notice, that officer shall forthwith notify the Medical Officer of Health of the other area with a view to the services being continued in that other area.

The local health authority shall furnish the midwife selected by or assigned to each applicant with a record form to be completed by her and forwarded to the Medical Officer of Health on the termination of the case.

The midwife service will be provided by the local health authority free of charge and will include, in each case, the supply of an accouchement outfit.

The local health authority will make payment under Section 22 (i) of the Midwives (Scotland) Act, 1915, of the prescribed fee to a medical practitioner called in emergency by a midwife conducting a midwifery case on her own responsibility.

On the assumption that the present birth rate will remain fairly constant, it is estimated that the average number of domiciliary confinements to be conducted under the proposals will be 4,000. The aim will be to restrict the number of confinements which a midwife will be permitted to attend to 80 per annum.

4.

RECORDS.

The midwives shall keep records, without prejudice to the rules of the Central Midwives Board for Scotland on the subject of records, in such form as the Secretary of State may direct, and permit access to

these on request to the Medical Officer of Health by the general practitioner, clinic medical officer, specialist or hospital concerned.

Where an expectant mother in receipt of services under these arrangements removes to another district within the local health authority's area ; or to the area of another local health authority ; or is removed to hospital ; an arrangement will be made for the transfer of the relative records.

Standing instructions will be issued in consultation with the Executive Council and the District Nursing Associations, to midwives for the conduct of cases.

5. ARRANGEMENTS WITH REGIONAL HOSPITAL BOARD.

Arrangements will be entered into with the Regional Hospital Board for :—

- (a) facilities being made available whereby pupil midwives from the maternity hospital may attend such women as desire their confinements conducted in terms of these arrangements for the purpose of receiving district training by midwives approved by the Central Midwives Board for Scotland. The Hospital Board will be responsible for the boarding of the pupil midwives ;
- (b) midwives who desire, or who, in the opinion of the supervising authority, should undergo a refresher course, to obtain the same in an approved maternity hospital ;
- (c) the supply of accouchement outfits ;
- (d) the ante-natal visitation by practising midwives of women (if such be considered desirable by the Regional Hospital Board) who have applied for admission to the maternity hospital ;
- (e) training facilities to be available at the maternity hospital for midwives in the administration of analgesia.

In addition to the proposals contained in paragraph (b) above with regard to refresher courses, the local health authority will arrange to provide instruction in district technique under the tuition of a teacher of midwifery.

In connection with the proposals contained in paragraph (e) above, the necessary apparatus will be provided to each midwife on completion of training and passing the necessary examination.

6. ESTIMATED COST OF THE SERVICE.

(a) Expenditure as local supervising authority (excluding fees to doctors called in any emergencies by midwives)	£17,150 0 0
(b) Payments under agreement with hospitals in respect of the domiciliary midwifery service ...	—
(c) Payments under agreement with voluntary organisations in respect of that service ...	4,000 0 0
(d) Other expenditure incurred by the authority in connection with that service	1,700 0 0
	<hr/>
	£22,850 0 0
	<hr/>

Proposals for Health Visiting.

NATIONAL HEALTH SERVICE (SCOTLAND) ACT, 1947.

Section 24.—(1) It shall be the duty of every local health authority to make provision in their area for the visiting of persons in their homes by visitors, to be called “health visitors,” for the purpose of giving advice as to the care of young children, persons suffering from illness and expectant or nursing mothers, and as to the measures necessary to promote health and to prevent the spread of infection.

(2) The duty of a local health authority under this Section may be discharged by making arrangements with voluntary organisations for the employment of those organisations of health visitors or by themselves employing health visitors.

1. GENERAL.

The local health authority will :—

- (a) employ a staff of whole-time visitors who will be allocated to specific areas ; and
- (b) employ, in certain areas, as part-time health visitors, district nurses whose services may also be utilised in the Home Nursing Scheme—Section 25, and the Domiciliary Midwifery Scheme—Section 23. Where midwifery work is undertaken, a nurse so doing will not undertake home visiting work in connection with infectious cases.

2. CONTROL AND SUPERVISION.

The service will be under the control and direction of the Medical Officer of Health.

There will be a supervisor of health visitors who shall subject to the provisions of any regulations which may be made under Section 65 of the Act, be a State Registered Nurse, a State Certified Midwife, and possess the Health Visitor's Certificate. She will act under the direction of the Medical Officer of Health and shall exercise supervision over all health visitors employed under the proposals and visit them at regular intervals at their work.

3. ARRANGEMENTS AS TO SCHOOL NURSES.

School nurses will be available to undertake the health visiting in houses where attendance is required by reason of a school child only.

4. FUNCTION OF HEALTH VISITORS.

Provision will be made so far as staff is available to cover all the requirements set forth in Section 24 of the Act.

The existing health visitors shall undertake the combined duties falling under the maternity and child welfare, tuberculosis, and the infectious disease categories. The services of the school nursing staff may be utilised in this sphere as above set forth.

- (a) *Young Children*.—The health visitors will carry out the routine visitation of pre-school children and undertake the supervision of children under the Children and Young Persons Acts.
- (b) *Persons suffering from illness*.—The health visitors will be available on request from a medical practitioner or hospital organisation to give advice where it is considered that this will be beneficial.
- (c) *Expectant and Nursing Mothers*.—In the ante-natal period the health visitor will give advice only in such cases as are not having attention from a domiciliary midwife unless requested to do so by the midwife or practitioner. In the post-natal period she will not visit during the first 14 days unless requested by the above-mentioned attendants.

(d) *Measures to promote health and prevent the spread of infection.* —

These will include the visitation by health visitors of houses in which notifiable infectious disease, including tuberculosis, has occurred and the disinfection of such homes; attendance at child welfare centres, dispensaries and at immunisation and vaccination clinics. They will also undertake educational activities and such duties as from time to time may be deemed necessary in the furtherance of positive health.

5. ARRANGEMENTS WITH HOSPITAL ORGANISATIONS.

The local health authority will be prepared, as far as numbers of staff permit, to enable patients to be visited by health visitors where the hospital authority desires that domiciliary contact be maintained either before admission to or after discharge from hospital. Health visitors will also be available to visit clinic defaulters on notification to the Public Health Department. The above arrangements will be operative by notification to the Medical Officer of Health.

6. ARRANGEMENTS WITH EXECUTIVE COUNCIL.

The local health authority will be prepared, as far as numbers of staff permit, on request by a medical practitioner either directly or on application to the Public Health Department, to make available, in suitable cases, the services of a health visitor where her advice can be helpful in the prevention of illness or to make known to the patient other information relative to the services available.

Should the nurse, in the opinion of the supervisor, be unable to overtake all the work accruing to her, the Medical Officer of Health may, after consultation with the doctor concerned, determine the priority of individual cases.

7. RELATIONSHIP WITH OTHER CLASSES OF HEALTH WORKERS.

The nurse health visitor will co-operate with the medical practitioner and/or full-time member of the public health medical staff in matters pertaining to the health and well-being of the patients.

The health visitor shall not normally attend a patient when a midwife is in attendance nor will she attend when a domiciliary nurse is providing home nursing, unless asked for by either of those officers; nor will she be required to give advice in the domain of the sanitary inspector, although maintaining close collaboration through the County Public Health Department with all other health workers.

It will be ensured that, on the completion of the puerperium, the midwife shall make available to the health visitor a record of all relevant information such as should receive attention by the health visitor.

Nurse health visitors will require to attend the Public Health Office each week when they will discuss the work and obtain such advice as falls within the province of the County Public Health Department.

8.

RECORDS.

The health visitor shall keep records in such form as the Secretary of State may direct and permit access to these on request to the Medical Officer of Health by the general practitioner, clinic medical officer, specialist or hospital concerned.

9.

QUALIFICATIONS OF HEALTH VISITORS.

Subject to the provisions of any regulations which may be made under Section 65 of the Act, all health visitors must hold the health visitors' diploma, but if there is difficulty in securing personnel with this qualification, it is proposed to employ only nurses who are state registered general nurses; state registered fever nurses and state certified midwives.

10.

ESTIMATED COST OF THE SERVICE.

(a) Payments under agreement with voluntary organisations						£2,000	0	0
(b) Other expenditure incurred by the authority ...						£23,000	0	0

General Provision Referable to Proposals for Home Nursing, Health Visiting and Domiciliary Midwifery Services.

HOUSING ARRANGEMENTS.

It is essential that nurses and midwives should be housed centrally in the area in which they are working. The local health authority will endeavour to arrange for such accommodation as may be necessary in conjunction with the District Nursing Association for the area. Where in any area it is found impossible to provide a home nursing service, a domiciliary midwifery service or a health visitor's service

owing to lack of accommodation, representation will be made to the authority responsible for the provision of housing in the area.

In each area where a house is provided, one room will, if possible, be set apart as a "district room" in which equipment will be stored, patients interviewed and, dressings and other duties carried out by the nurse.

The aim will be to ensure that each house is equipped with a telephone.

Appendix IV shows the existing position with regard to the housing of nurses, midwives and health visitors.

TRANSPORT ARRANGEMENTS.

It is essential that transport should be available for all district nurses and midwives, having regard to the equipment which they require for the carrying out of their duties. The provision of suitable transport facilities to meet the special requirements of each district will be a matter for adjustment between the local health authority and the individual nursing associations, and the private practising state certified midwives. The local health authority will pay the cost of such provision under suitable check by the Medical Officer of Health.

No transport will be provided for a health visitor in the populous areas of the county, but in certain rural areas where special arrangements are necessary to enable the health visitor to overtake her duties, suitable transport facilities will be made available, the cost of which will be paid by the local health authority under suitable check by the Medical Officer of Health.

Appendix IV shows the form of transport at present generally used by nurses, midwives and health visitors.

Estimated Number of Nurses required to overtake the Nursing Services which are to be the obligation of the local health authority.

HOME NURSING.

The present service covers district nursing in all areas of the County, albeit the duties in certain districts are provided by Queen's Nurses based in neighbouring Burghs. Those latter areas, it is reckoned, can be covered by 8 nurses.

	Present Staff.	Staff Proposed for Appointed Day.
Supervisor	—	1
Existing number of nurses	46	46
Nurses required to cover the areas at present undertaken by nurses from neighbouring Burghs	8	8
Additional nurses required in present areas	—	4
Additional nurses required for relief, holiday and sickness duty	—	10
	<hr/>	<hr/>
	54	69
Less nurses doing health visiting 5		
Less nurses doing domiciliary midwifery 12		
	<hr/>	<hr/>
	17	17
	<hr/>	<hr/>
	37	52
	<hr/>	<hr/>

Health Visiting.

The present service includes visitation in connection with :—

- (1) Pre-school children.
- (2) Expectant and nursing mothers.
- (3) Tuberculosis patients and dispensaries.
- (4) Infectious diseases.
- (5) Attendance at Child Welfare Clinics.
- (6) Attendance at Immunisation Clinics,

and such ancillary services as are connected therewith, *e.g.*, Ear, Nose and Throat*, Diabetic*, Eye and Dental Clinics, Scabies, Anaemia*, Domestic Helps, etc.

	Present Staff.	Staff Proposed for Appointed Day.
Supervisor	1	1
Matrons at Health Institutes and Day Nurseries	6	6
Existing number of health visitors ...	38	38
Number of part-time health visitors (Queen's Nurses) 15 say	5	5
Additional health visitors recommended as necessary in proposals submitted ...	—	10
	<hr/>	<hr/>
	50	60
	<hr/>	<hr/>

* These presumably will, as specialist clinics, be the province of the Regional Hospital Board, but it may be that the Board may require assistance in nursing staff from the local authority.

Midwifery Service.

The present Maternity Services Scheme covers approximately two-thirds of the annual registered births, which, for the period 1942-1946, averaged 6,465. In effect, preparation is made to attend 4,000 domiciliary confinements.

	Present Staff.	Staff Proposed for Appointed Day.
Supervisors	2	2
Existing number of whole-time midwives	12	12
Existing number of midwives on so-called part-time (case) basis but actually equivalent to whole-time midwives ...	27	27
Existing number of Queen's Nurses conducting midwifery 30—say two-fifths of time devoted to midwifery	12	12
	<u>53</u>	<u>53</u>

School Nurses.

	Present Staff.	Staff Proposed for Appointed Day.
Existing staff—29.		
As population of County Schools and Burgh Schools is approximately equal, accredit for County work, say	16	16
	<u>16</u>	<u>16</u>

Day Nurseries.

	Present Staff.	Staff Proposed for Appointed Day.
State Registered Nurses (other than Matrons)	6	6
	<u>6</u>	<u>6</u>

Summary.

	Present Staff.	Staff Proposed for Appointed Day.
Home Nursing	37	52
Health Visiting	50	60
Domiciliary Midwifery Service	53	53
School Service	16	16
Day Nurseries	6	6
	<u>162</u>	<u>187</u>

This is equivalent on the present staff to 5.4 nurses and on the proposed staff for the appointed day to 6.2 nurses per 10,000 of the population.

The target figure proposed is 8.5 per 10,000 of the population which would provide for 255 *nurses*. This number of nurses is closely inter-related to the supply of transport and does not provide for any requests which may be made to the local health authority for nursing services by the Regional Hospital Board or the Executive Council.

APPENDIX I.

Heads of Agreement with District Nursing Association.

1. The Association undertakes to provide whenever required in their area the services of their existing nurse(s) for home nursing, midwifery, health visiting, or such duties as may be agreed upon in accordance with the provisions of the local health authority's proposals under the National Health Service (Scotland) Act, 1947.
2. The Association undertakes to modify or extend their existing district should this be considered expedient by the Medical Officer of Health to ensure that home nursing, etc., services are provided throughout the altered area.
3. The Association, through the Supervisor, shall supply to the local health authority a list of the names and addresses and the qualifications of the nurse(s) now employed by them in pursuance of this Agreement and of all reasonable particulars required by the local health authority in regard to such nurses and of the area in which each nurse is available for service, and shall forthwith inform the authority of any resignation from the list.
4. The Association undertakes on the occurrence of a vacancy in their district not to make the appointment of a successor without the approval of the Medical Officer of Health.
5. The nurse shall keep records, in such form as the Secretary of State may direct, and permit access to these on request to the Medical Officer of Health by the general practitioner, clinic medical officer, specialist or hospital concerned.

The nurse will send to the local health authority through the Supervisor each month or at such other times as may be required a return of the work done.

6. The local health authority undertakes, during the currency of this Agreement, to pay to the Association the inclusive salary of the nurse. The qualifications, remuneration, and conditions of service of nurses employed by the Association shall be the same as may be fixed from time to time for officers employed by local health authorities on similar duties.

7. The local health authority undertakes to pay expenses incurred in the provision of transport in accordance with the General Provisions Referable to Proposals for Home Nursing, Health Visiting and Domiciliary Midwifery.

8. Incidental expenses necessarily incurred and approved by the Medical Officer of Health in connection with the Scheme will be refunded by the local health authority.

9. Nurses employed by District Nursing Associations will be subject to the supervision of the Medical Officer of Health and under the immediate control of the Supervisor.

10. The Association agrees that any complaint or dispute as to failure or neglect of a nurse to carry out her duties in accordance with the terms of this Agreement shall be referred to the Association and thereafter transmitted, with their observations, through the Supervisor to the Medical Officer of Health, and on a written report by him, the local health authority will decide what action should be taken and refer their decision to the Association for information.

11. The Association agrees with the local health authority that this Agreement shall have effect as from day of and shall continue in force, subject to any variations which may be agreed between the local health authority and the Association and in so far as they affect the financial arrangements approved by the Secretary of State, until it is determined either by agreement between the parties or by not less than three months' notice in writing, terminating on the day of in any year.

This Agreement may be reviewed in the light of experience after a period of two years and periodically thereafter.

APPENDIX II.

List of Equipment to be Maintained and Stored by the local health authority and the Nurse.**(a) Equipment to be stored by local health authority :—**

Air beds.	Bed pans.
Air rings.	Urinals.
Wheel chairs.	Rubber sheeting.
Cradles.	Feeding cups.
Bed rests.	Crutches.
Bed tables.	

(b) Equipment to be stored by Nurse :—

Special cupboard.	Measure.
District and midwifery bags fitted.	Enamel bowls and receivers.
Dressings and lotions.	Pair dressing forceps.
Rubber tubing and Catheters.	Pair dissecting forceps.
Glass funnels.	Nail brushes.
Glass connections.	Urine testing set.
Douche nozzle.	Sterilizer.
Ear syringe.	Midwifery overalls.
Record syringe.	Masks.
Undine.	Head squares.
Eye dropper and glass rod.	Rubber gloves.
Enamel jug.	

APPENDIX III.

Reg. No.

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COUNTY COUNCIL OF THE COUNTY OF LANARK.

NATIONAL HEALTH SERVICE (SCOTLAND) ACT, 1947.

Scheme of Domiciliary Midwifery.

FORM OF APPLICATION.

To the Medical Officer of Health.

I hereby apply for midwife services in connection with my forthcoming confinement, which I expect to occur about (date).....

I desire to be attended by (Name)
 (Address)
 as midwife.

I have arranged for the services of Dr. (Name)
 (Address)
 as medical attendant.

I undertake to comply with any instructions given me by the practitioner or the midwife in attendance.

Signature

Address

Date.....

N.B.—A list of the midwives available may be consulted at the nearest Health Institute, Maternity and Child Welfare Centre, or at the office of the Medical Officer of Health, County Public Health Department, Beckford Street, Hamilton.

If the applicant cannot obtain a midwife, the local authority will provide one.

APPENDIX IV.

(a) Statement showing Number of District Nurses available and the Houses, Telephones and Cars provided.

District Nursing Association.	HOUSES.					
	Present Staff of Nurses.	Owned by District Nursing Assoc.	Rented by District Nursing Assoc.	Nurses in Lodgings.	Telephone.	Car.
Baillieston and Bargeddie	1 & 1 part-time	1	—	—	1	1
Bellshill and Mossend	2	1	—	—	1	—
Biggar	1	1	—	—	1	1
Blackwood	1	—	—	1	1	1
Blantyre	2	1	—	—	1	1
Bothwell	1	—	—	1	1	—
Bothwellhaugh	1	—	—	1	1	—
Cadder	1	1	—	—	1	On order
Cambuslang	2	1	—	—	1	2
Carluke	2	—	1	—	1	1
Carmichael-Anstruther	1	1	—	—	1	1
Carnwath	1	1	—	—	1	1
Carstairs	1	—	1	—	1	On order
Chapelton	1	—	—	Nurse's own house	1	—
Chryston	1	—	1	—	1	1
Cleland	1	—	—	1	1	1
Clydeside	1	—	—	1	1	1
Coalburn	1	—	—	1	1	1
Crawford	1	1	—	—	1	On order
Caldercruix	1	—	1	—	1	1
Dalserf	1	1	—	—	1	1
Douglas	1	—	—	1	1	1
Douglas Water	1	—	1	—	1	1
East Kilbride	1	1	—	—	1	1
Forth	1	—	—	1	—	1
Gartcosh	1	1	—	—	1	—
Glenboig	1	1	—	—	1	—
Harthill	1	—	1	—	1	—
Hartwoodhill	1	—	1	—	1	—
Holytown	1	1	—	—	—	—
Lanark	2	1	—	—	1	—
Larkhall	1	1	—	—	1	—
Leadhills	1	1	—	—	—	—
Lesmahagow	1	—	—	1	1	1
Newmains	1	1	—	—	1	1
Overtown, Waterloo, Law	1	—	1	—	1	1
Quarter	1	1	—	—	1	—
Stane and Shotts	1	1	—	—	—	—
Stonehouse	1	—	—	1	—	On order
Strathaven	1	—	—	1	1	—
Uddingston	1	1	—	—	1	—

(b) Statement showing Number of Midwives available and the position with regard to Houses, Telephones, Cars, Garages and Consulting Rooms.

Whole-time Midwives.

HOUSING.							Form of Transport normally used.	" Consulting-Room" Accommodation.
Present Staff.	At Own Home.	In Lodgings.	Telephones.	Cars.	Garage Accommodation.			
Bargeddie ...	1	1	—	1	—	—	Bicycle, bus or tram	Living-room
Barrowhill ...	1	—	1	1	—	—	do.	do.
Beland ...	1	—	1	*	—	—	Bicycle and bus	do.
Balfway ...	1	1	—	1	—	—	do.	do.
Barthill ...	1	—	1	1	—	—	do.	do.
Bewmains ...	1	1	—	1	—	—	do.	do.
Botts ...	1	—	1	1	—	—	do.	Bed-sitting-room
Braithaven ...	1	1	—	1	—	—	Bus	Living-room
Buddingston ...	1	—	1	1	—	—	Bus and tram	do.
Relief Nurses ...	3	—	3	—	—	—	Bus	do.
	12	4	8	8				

* To be installed

Private Practising Midwives on Case Basis.

Binnathill ...	1	1	—	1	1	Yes	Car	Living-room
Bellshill ...	1	1	—	1	—	—	Bicycle	do.
	1	1	—	1	—	—	Bus	do.
Blaentyre ...	1	1	—	1	1	Yes	Car	Sitting-room
	1	1	—	1	—	—	Bicycle	do.
	1	1	—	1	—	—	do.	do.
Bambuslang ...	4	4	—	4	—	—	Tram or bus	do.
Barnfin ...	1	1	—	1	—	—	Bus	Bed-sitting-room
Bapelhall ...	1	—	1	1	—	—	Bicycle	Bedroom
Bapelton ...	1	1	—	1	1	Yes	Car	Sitting-room
Batbridge ...	1	1	—	—	—	—	Bus	Living-room
	1	1	—	—	—	—	do.	do.
	1	1	—	1	—	—	do.	do.
Bereingairs ...	1	1	—	1	—	—	do.	Sitting-room
Bolytown ...	1	Single end	—	1	—	—	Bicycle	Own single end
Barkhall ...	3	3	—	3	3	Yes	Car	Living-room
Berkle Earnock ...	1	1	—	1	—	—	Bus	do.
Bossend ...	1	1	—	1	—	—	Bicycle	do.
Buirhead ...	1	1	—	1	1	Yes	Car	do.
Bettleston ...	1	1	—	1	—	—	Bus and tram	do.
Botts ...	1	1	—	1	—	—	Bicycle	do.
Bannochside ...	1	1	—	1	—	—	Bus	do.
	27	26	1	25	7			

Nurses Employed by District Nursing Associations.

HOUSING.										Form of Transport generally used.	"Consulting-room" Accommodation.
	Present Staff.	Owned by D.N.A.	Rented by D.N.A.	Lodgings.	Midwife living at own home.	Telephones.	Cars.	Garage Accommodation.			
Biggar	1	1	—	—	—	1	1	Yes	Car		Sitting-room
Bishopbriggs	1	1	—	—	—	1	—	Yes	Car (on order)		do.
Blackridge (outwith area)	1	—	—	—	—	—	—	—	—		—
Bothwell	1	—	—	1	—	1	—	—	Bicycle and Bus		Sitting-room
Bothwellhaugh	1	—	—	1	—	—	—	—	Bus		do.
Caldercruix	1	—	1	—	—	1	1	Yes	Car		do.
Cleland	1	Lives in Wishaw									
Carnwath	1	1	—	—	—	1	1	Yes	do.		do.
Carluke	2	—	1	—	—	1	1	Yes	do.		do.
Carstairs	1	—	1	—	—	1	—	—	Bicycle		do.
Coalburn	1	—	—	1	—	1	1	Yes	Car		do.
Crawford	1	—	1	—	—	1	—	Yes	Car (on order)		do.
Douglas	1	—	—	1	—	1	1	Yes	Car		do.
Douglas Water	1	—	1	—	—	1	1	Yes	do.		do.
East Kilbride	1	1	—	—	—	1	1	Yes	do.		do.
Forth	1	—	—	1	—	—	1	Yes	do.		do.
Glenboig	1	1	—	—	—	1	—	—	Bicycle		do.
Gartcosh	1	1	—	—	—	1	—	—	do.		do.
Kirkfieldbank	1	—	—	1	—	1	1	Yes	Car		do.
Kirkmuirhill	1	—	—	1	—	1	1	Yes	do.		do.
Lanark	2	1	—	—	—	1	—	—	Bicycle		do.
Leadhills	1	1	—	—	—	1	—	—	do.		do.
Lesmahagow	1	—	—	1	—	1	1	Yes	Car		do.
Overtown	1	—	1	—	—	1	1	Yes	do.		do.
Quarter	1	1	—	—	—	1	—	—	Bicycle		Consulting-room
Stonehouse	1	—	—	—	1	—	—	—	do.		Sitting-room
Thankerton	1	1	—	—	—	1	1	Yes	Car		do.
West Linton (outwith area)	1	—	—	—	—	—	—	—	—		—
	<u>30</u>	<u>10</u>	<u>6</u>	<u>*8</u>	<u>1</u>	<u>22</u>	<u>14</u>				

When no public conveyance is available and during the night a taxi hire is permitted

* Three nurses live outwith the area. In two areas two nurses are housed in one house

(c) Statement showing Number of Health Visitors available and the Position with regard to Houses, Telephones, Cars, Garages and Consulting Rooms.

Whole-time Health Visitors.

HOUSING.

	Present Staff.	Number to be appointed.	Living at Home.	Living in Lodgings.	Within District.	Outwith District.	Telephones.	Cars.	Garage.	Form of Transport normally used.	Consulting-rooms.
Baillieston and District ...	2	1	2	—	—	2	At Health Institute	—	—	Bus or Tram	At Health Institute
Bellshill and District ...	5	1	5	—	1	4	do.	—	—	Bus	do.
Blantyre and District ...	3	—	3	—	—	3	do.	—	—	do.	do.
Cambuslang, including Rutherglen Parish and Bankhead ...	5	1	4	1	1	4	do.	—	—	Bus or Tram	do.
Chapelhall and Calderbank ...	1	—	1	—	—	1	Office of Call	—	—	Bus	do.
Hamilton Parish ...	1	1	1	—	1	—	do.	—	—	do.	—
Holytown and New Stevenston ...	1	1	1	—	—	1	do.	—	—	do.	—
Larkhall and District ...	2	1	2	—	—	2	At Health Institute	—	—	do.	At Health Institute
Lower Ward, including Bishopbriggs and Chryston ...	4	—	4	—	—	4	Bishopbriggs (Woodhall)	—	—	Bus or Tram	Bishopbriggs
New Monkland Parish ...	1	—	1	—	—	1	Office of Call	—	—	Bus	—
Newarthill and Carfin, also Cleland ...	1	1	1	1	—	1	do.	—	—	do.	—
Newmains and Cambusnethan Parish ...	2	1	2	—	—	2	do.	—	—	do.	—
Salsburgh and Harthill ...	1	—	1	—	—	1	do.	—	—	do.	—
Shotts and District ...	2	1	2	—	2	—	At Health Institute	—	—	do.	At Health Institute
Strathaven and East Kilbride ...	1	1	1	1	1	1	At Strathaven Office	—	—	do.	At Strathaven Office
Uddingston and Bothwell ...	2	—	2	—	1	1	Office of Call	—	—	do.	—
Upper Ward—Lanark, Carlisle, etc. ...	2	1	2	—	2	—	At Lanark Office	—	—	Bus or Train	At Lanark Office
Lesmahagow, Coalburn, etc. ...	1	—	1	—	1	—	Office of Call	—	—	Bus	—

Part-time Health Visitors (District Nurses employed by District Nursing Association).

HOUSING.

	Present Staff	Owned by D.N.A.	Rented by D.N.A.	Living at Home.	Living in Rooms.	Telephones.	Cars.	Garage.	Form of Transport normally used.	Consulting-rooms.
Biggar ...	1	1				1	1	1	Car	Sitting-room
Caldercruix ...	1		1			1	1	1	do.	do.
Carnwath ...	1	1				1	1	1	do.	do.
Crawford ...	1	1				1	On order		do.	do.
Douglas ...	1				1	1	1	1	do.	do.
Forth ...	1				1	1	1	1	do.	do.
Glassford ...	1			1		1	1	1	do.	do.
Glenboig ...	1	1				1			Bicycle	do.
Kirkfieldbank ...	1				1	1	1	1	Car	do.
Leadhills ...	1	1				1			Bicycle	do.
Lesmahagow ...	1				1	1	1	1	Car	do.
Quarter ...	1	1				1			Bicycle	Consulting-rooms
Stonehouse ...	1			1			On order		do.	Sitting-room
Thankerton ...	1	1				1	1	1	Car	do.
West Linton—Dolphinton and Dunsyre ...	1	1				1	1	1	do.	do.

The foregoing proposals, approved at the Monthly Meeting of the County Council of the County of Lanark, held in Lanarkshire House, Glasgow, on Wednesday, the fifth day of May, 1948, are signed for and on behalf of the said County Council by John Mann, Convener, and Robert M'Cracken, Member of County Council, and William C. Brownlie, County Clerk.

(Sgd.) JOHN MANN, Convener of County Council.

(Sgd.) ROBERT M'CRACKEN, Member of County Council.

(Sgd.) WM. C. BROWNLIE, County Clerk.

Approved by the Secretary of State for Scotland.

(Sgd.) T. D. HADDOW, *Assistant Secretary*.

LANARKSHIRE HOUSE,
GLASGOW, C.I.

Department of Health for Scotland,
EDINBURGH, 3rd July, 1948.

PROPOSALS FOR HOME NURSING, DOMICILIARY MIDWIFERY AND HEALTH VISITING SERVICES.

Proposals for the Provision of Home Nursing.

NATIONAL HEALTH SERVICE (SCOTLAND) ACT, 1947.

Section 25.—It shall be the duty of every local health authority to make provision in their area, whether by making arrangements with voluntary organisations employing nurses or by themselves employing nurses, for securing the attendance of nurses on persons who require nursing in their own homes.

GENERAL.

1. *A.* Persons who require nursing in their own homes will be entitled to the attendance of a nurse free of charge.

B. Provision of the nursing service will be made available in one or other of the following ways :—

(*a*) An agreement will be entered into with the existing District Nursing Associations to undertake home nursing duties in their area. The heads of agreement are shown in Appendix I attached.

(*b*) Use of part-time nurses where available.

(*c*) Employment of whole-time nurses in areas not covered by (*a*) and (*b*).

C. Subject to the provisions of any regulations which may be made under Section 65 of the Act, the nurses to be employed shall be registered general nurses, preferably those who have district training, and in areas where the nurse undertakes midwifery work she shall also be a state certified midwife. In some areas it may be that the nurse will also undertake health visiting work in which case due consideration will be given to those with suitable qualifications or experience. In any case, preference will be given to those who have district training such as is at present provided by the Queen's Institute of District Nursing.

D. A nurse may attend a case in emergency but she shall not give continued attendance except under the direction of the medical attendant.

Application for the service of a home nurse will be made except in emergency by the doctor directly to the nurse for the area, subject to such restriction as may require to be imposed under sub-paragraph (3) of paragraph 2 below (Supervision of Service). In emergency any householder may apply directly to the nurse.

Standing instructions regarding the conduct of cases will be issued in consultation with the Executive Council and the District Nursing Association to all nurses participating in the proposals.

The nurses shall keep records in such form as the Secretary of State may direct and permit access to these on request to the Medical Officer of Health by the general practitioner, clinic medical officer, specialist or hospital concerned.

Where a person in receipt of services under these arrangements removes to another district within the local health authority's area; or to the area of another local health authority; or is removed to hospital, an arrangement will be made for the transfer of the relative records.

E. The local health authority will maintain and store centrally certain appliances and equipment which will be available to the local health authority's whole-time and part-time nurses, and will be given on loan to District Nursing Associations if they are unable to provide such appliances and equipment—see Appendix II.

Each nurse will maintain in her own home such equipment as she can reasonably store—see Appendix II.

2. SUPERVISION OF THE SERVICE.

(1) The service will be under the control and direction of the Medical Officer of Health.

(2) Subject to the provisions of any regulations which may be made under Section 65 of the Act, the local health authority will appoint or obtain the services of a Queen's Nurse, or one who has had Queen's training, as a whole-time supervisor, who shall act under the direction of the Medical Officer of Health. She shall exercise supervision over all nurses employed in home nursing, visit nurses at regular intervals, inspect their work and appliances, and co-ordinate the working of the proposals.

(3) Should the nurse in a given area, in the opinion of the supervisor, be unable to overtake all the nursing requirements of the area, the Medical Officer of Health may, after consultation with the doctor concerned, determine the priority of individual cases.

(4) Access to all aspects of the work shall be given for inspection by authorised officers of the local health authority and the Department of Health for Scotland.

3. ARRANGEMENTS TO BE MADE WITH VOLUNTARY ORGANISATIONS.

Subject to the provisions of these proposals, an arrangement will be made with the District Nursing Association whereby the home nursing in their areas will be undertaken by the existing nurses. The local health authority may arrange for an additional nurse being appointed in any area or for certain adjustments being made in the areas served by the associations. While the actual control of the service will be the responsibility of the local health authority, Nursing Associations will be encouraged to maintain an interest in the working of the proposals whereby any existing monies and those which may accrue at a later date can be used by the associations for the amelioration of the condition of patients and of nurses in ways which are outwith the statutory provisions.

Nurses employed by the District Nursing Associations will remain their servants, but the inclusive salaries of those at present employed by these associations and of those appointed by them with the approval of the Medical Officer of Health, will be reimbursable by the local health authority.

4. ESTIMATED COST OF THE SERVICE.

(a) Payments under agreement with District Nursing Associations—£20,000—less say, £2,000, at present paid to District Nursing Association for midwifery fees.

(b) Other expenditure incurred by the local health authority—£10,000.

Scheme for Carrying Out the Functions of the Local Health Authority in Relation to Immunisation against Diphtheria under Section 26 (1).

(A) The parent of any child who signifies his or her desire on the appropriate form to have a child immunised against diphtheria shall be entitled to that service free of charge.

It will be made available :—

- (a) By the parent's own doctor whether he is giving service under the Act or otherwise ;
- (b) At fixed clinics held in County Council premises and staffed by County Council's nursing and clerical staff :—
 - (1) By practitioners who will be paid on a sessional basis ;
 - (2) By County Council medical staff.

The antigen to be used in all infants will be A.P.T. ; in children over 8 years of age and in all reactivating doses in children over this age the antigen will be T.A.F.

Antigen will be supplied free to general practitioners through a central authority, e.g., Public Health Department, or Health Centre.

Immunisation will be carried out preferably on the child attaining the age of one year but at any subsequent age in the untreated. Reactivating doses will be offered at age 5 and 9 years or at similar intervals in those not immunised until a later date.

The following methods will be adopted to ensure that as many infants as possible are protected :—

- (1) On registering a birth the parent will, subject to the agreement of the Registrar General, be presented by the Registrar with a pamphlet prepared by the Public Health Department advocating immunisation so soon as the infant has reached the age of nine months.
- (2) Every general practitioner will be urged to discuss with the mother the pamphlet issued by the Registrar and will be reminded, on an appropriate form by the Health Visitor, that the child has now reached the age for immunisation.

- (3) It shall be the duty of the Health Visitors to make every effort to secure the immunisation of children in their respective districts. When a child approaches the age of nine months, a *special visit* will be made to arrange the date of the mother's attendance with the baby at the doctor's surgery or at the fixed clinic.
- (4) School Medical Officers will be prepared to address Teacher-Parent Associations with a view to furthering the interests in the subject.

Note.—The desirability of Schick testing is, of course, recognised. It is not, however, meantime proposed—owing to the demands which would be made on the available personnel and to the natural objection on the part of parents and children—to make any provision for the general testing of cases immunised but in certain selected and willing cases in each district, and the child of any parent who expresses a wish to have the test carried out, will be so tested to enable a record of the results accruing from the treatment to be kept.

Immunisation of children in day nurseries and nursery schools will continue to be practised as heretofore and the parent will require to give his or her consent on admission.

(B) The immunisation state of children entering school will be ascertained. Reactivating doses will be given where appropriate and a full course for others will be carried out :—

- (1) In populous areas this will be arranged apart from routine school medical inspection.
- (2) In remote areas concurrently with routine school medical inspection.

Schools of over 250 will generally be provided with separate sessions. Those under that number will be considered as being in sparsely populated areas. It will be open to any parent, if she chooses, to have her pre-school child immunised at such sessions. In the populous districts general practitioners will, if practicable, conduct these school clinics on a sessional basis. Failing practitioners' service being available, it will be carried out by the County Council's medical staff.

(C) At all child welfare centres, sessions will be conducted (subject to demand).

Pre-arranged regular school sessions will be held in the populous areas and in the sparser areas as above defined as the demand requires.

(D) Full advantage will be taken of all literature, cinematographic films, etc., issued by the Department of Health. Co-operation will continue to be maintained with the Scottish Council for Health Education.

(E) The present methods of local propaganda will be continued, viz. :—

- (1) Regular talks will be given by the doctors at all child welfare centres stressing the importance of this treatment.
- (2) Cinematographic films will be shown regularly.
- (3) Health Visitors will carry out the propaganda already indicated in (A).
- (4) Pamphlets issued centrally will be distributed at all regular clinics and discussed by the Health Visitor at routine domiciliary visits.
- (5) Local associations will continue to be informed of the health propaganda films available to the Public Health Department, including films dealing with this subject.
- (6) Meetings arranged through the agency of County Councillors will be addressed as and when mutually agreed.

(F) Full co-operation will be maintained with the Executive Council and medical practitioners will have the opportunity of serving on a sessional basis in our premises (including schools) staffed as already described.

When practitioners are not available in sufficient numbers, the County Council's own staff will be utilised.

(G) General practitioners taking part in the authority's arrangements will be required, for record purposes, to furnish particulars in a form approved by the Secretary of State, of immunisations performed under these arrangements. On the basis of receiving these particulars, the authority will pay to the practitioner such fees according to circumstances as the Secretary of State may from time to time approve.

Co-operation will be maintained with the Regional Hospital Board to ensure that hospital accommodation will be available in the event of any child developing a sore arm requiring indoor treatment.

OTHER DISEASES.

Immunisation against Pertussis is meantime not contemplated but as and when this method of treatment is centrally fully approved and advocated, a scheme will be devised on similar lines to that described under diphtheria.

T.A.B. inoculation will be arranged if and when the necessity for such is deemed by the Medical Officer of Health to have arisen in any locality.

The position with regard to B.C.G. vaccination is not sufficiently clarified or assured to enable any pronouncement to be made.

ESTIMATE OF WORK TO BE UNDERTAKEN.

It is anticipated that, as a result of propaganda, the work will be increased during the period 5th July, 1948, to 16th May, 1949. The estimated figures for this period are as follows:—

					<i>Primary.</i>	<i>Reactivating.</i>
(a) Children born in 1944 and later						
years	...	...	...	...	4,000	90
(b) Children born in the years 1934 to						
1943, inclusive	...	...	...	...	2,500	2,500
(c) Persons born before 1934			...	...	—	400

ESTIMATED EXPENDITURE.

(a) *Operation of service.*—Although it is hoped that general medical practitioners will carry out the immunisation of pre-school children, provision has been made in our estimate for half of this work being done by our own medical officers.

It is anticipated that the immunisation and reactivation of school children will largely be carried out by general medical practitioners on a sessional basis with the aid of our nursing and clerical staff.

The expenditure on these services should not exceed £1,000 in the period under review, excluding notification fees to general medical practitioners.

If the work is not carried out by the general medical practitioners and is to be carried out by our own staff we do not anticipate that the expenditure will exceed the £1,000 stipulated plus the cost of notification fees.

(b) *Propaganda*.—The cost of printing and travelling expenses in connection with the exhibition of films is estimated at £200.

(c) Provision has been made in the above estimate of £1,000 for the services of two clerkesses in connection with records, clinic attendances and propaganda.

The foregoing proposals, approved at the Monthly Meeting of the County Council of the County of Lanark, held in Lanarkshire House, Glasgow, on Wednesday, the fifth day of May, Nineteen hundred and forty-eight, are signed for and on behalf of the said County Council by John Mann, Convener, and Robert M'Cracken, Member of County Council, and William C. Brownlie, County Clerk.

(Sgd.) JOHN MANN, Convener of County Council.

(Sgd.) ROBERT M'CRACKEN, Member of County Council.

(Sgd.) WM. C. BROWNLIE, County Clerk.

Approved by the Secretary of State for Scotland.

(Sgd.) T. D. HADDOW, *Assistant Secretary*.

Department of Health for Scotland,
EDINBURGH, 3rd July, 1948.

LANARKSHIRE HOUSE,
GLASGOW, C.1.

Scheme for Carrying Out the Function of the Local Health Authority in Relation to Vaccination against Smallpox under Section 26 (1).

(A) The parent of any child and any person who signifies his or her desire on the appropriate form to have vaccination against smallpox carried out shall be entitled to that service free of charge.

It will be made available :—

- (a) By the parent's own doctor whether he is giving service under the Act or otherwise ;
- (b) At fixed clinics held in County Council premises and staffed by County Council's nursing and clerical staff :—
 - (1) By practitioners who will be paid on a sessional basis ;
 - (2) By County Council medical staff.

Lymph will be supplied free to general practitioners through a central authority e.g., the Public Health Department or Health Centre.

Vaccination will be carried out by choice during the first six months of the child's life but at any subsequent age in the untreated.

Revaccination will be offered at age of five years or similar intervals in the untreated.

The following methods will be adopted to ensure that as many infants as possible are vaccinated :—

- (1) On registering a birth the parent will, subject to the agreement of the Registrar General, be presented by the Registrar with a pamphlet prepared by the Public Health Department advocating vaccination.
- (2) Every general practitioner and midwife will be urged to discuss with the mother the pamphlet issued by the Registrar and will be reminded on an appropriate form by the Health Visitor when the child is three months old.
- (3) The Health Visitor at her regular visits will impress on mothers the benefit of vaccination at the appropriate age.
- (4) School Medical Officers will be prepared to address Teacher-Parent Associations with a view to furthering the interest in the subject—should the need for widespread vaccination arise.

(B) On the occurrence of smallpox, house to house vaccinations in the vicinity of the case will immediately be offered and carried out in the interests of speed by members of the County Council's medical staff. Thereafter facilities for the wider population will be offered at clinics held in County Council's or, if necessary, hired premises. Medical practitioners, if available, will be offered participation in this Scheme on a sessional basis, failing which the work will be undertaken by members of the County Council's medical staff.

In emergency, the Medical Officer of Health shall make any special arrangements he deems necessary.

(C) At all Child Welfare Centres sessions will be held if the demand warrants this.

School sessions will be arranged only on the occurrence of a case.

(D) Full advantage will be taken of all literature, cinematographic films, etc., issued by the Department of Health. Co-operation will continue to be maintained with the Scottish Council for Health Education.

(E) The following methods of local propaganda will be undertaken, viz. :—

- (1) Regular talks will be given by the doctors at all Child Welfare Centres stressing the importance of this treatment.
- (2) Health Visitors and field workers will carry out the propaganda already indicated in (A).
- (3) Pamphlets issued centrally will be distributed at all regular clinics and discussed by the Health Visitor at her routine domiciliary visits.
- (4) Local associations will continue to be informed of the Health propaganda films available to the Public Health Department, including films dealing with this subject.
- (5) Meetings arranged through the agency of County Councillors will be addressed as and when mutually agreed.

(F) Full co-operation will be maintained with the Executive Council and medical practitioners will be given an opportunity of serving on a sessional basis should the demand necessitate.

(G) General practitioners taking part in the authority's arrangements will be required, for record purposes, to furnish particulars in a form approved by the Secretary of State, of vaccinations performed under these arrangements. On the basis of receiving these particulars, the authority will pay to the practitioners such fees according to circumstances as the Secretary of State may from time to time approve.

Co-operation will be maintained with the Regional Hospital Board to ensure that hospital accommodation will be available in the event of any child developing a sore arm requiring indoor treatment.

ESTIMATE OF WORK TO BE UNDERTAKEN.

During the period 5th July, 1948, to 15th May, 1949, it is hoped that, as a result of propaganda, the number of vaccinations carried out will be increased. The estimated number is as follows :—

(a) Children born in 1944 and later years	...	3,300
(b) Children born during the years 1934 to 1943,		
inclusive	... ... ... ... ... ...	100
(c) Persons born before 1934	... ... ...	100

This estimate does not take into account any increase in vaccination as a result of an outbreak of smallpox.

ESTIMATED EXPENDITURE.

(a) *Operation of Service*.—It is anticipated that at least half the work will be carried out by general medical practitioners for which a notification fee only is payable and no expenditure has been estimated for returns of this information.

If the other half of the work is carried out by the local authority's medical and nursing staff the expenditure should not exceed £100 for staff and equipment.

(b) *Propaganda*.—With the exception of the pamphlet prepared by the Public Health Department advocating vaccination and which will be handed to the parent on registering a birth, it is anticipated that all other pamphlet propaganda will be supplied centrally.

It is also anticipated that films will be supplied centrally free of charge and the only cost to the local authority should be travelling expenses.

The sum of £100 should cover both items mentioned above.

(c) Clerical assistance will be necessary to carry out the Scheme and an allocation of £50 per annum should be made for this service.

The foregoing proposals, approved at the Monthly Meeting of the County Council of the County of Lanark, held in Lanarkshire House, Glasgow, on Wednesday, the fifth day of May, Nineteen hundred and forty-eight, are signed for and on behalf of the said County Council by John Mann, Convener, and Robert M'Cracken, Member of County Council, and William C. Brownlie, County Clerk.

(Sgd.) JOHN MANN, Convener of County Council.

(Sgd.) ROBERT M'CRACKEN, Member of County Council.

(Sgd.) WM. C. BROWNLIE, County Clerk.

Approved by the Secretary of State for Scotland.

(Sgd.) T. D. HADDOW, *Assistant Secretary*.

Department of Health for Scotland,
EDINBURGH, 3rd July, 1948.

LANARKSHIRE HOUSE,
GLASGOW, C.1.

A. TUBERCULOSIS.

Arrangements for the Purpose of Preventing Tuberculosis and for the Care and After-Care of Persons Suffering from Tuberculosis. Section 27.

I GENERAL.

1. The local health authority's arrangements will comprise :—

MEASURES TO CONTROL THE SPREAD OF INFECTION.

(a) The authority will make arrangements for the tracing of contacts, and these, together with any other suspects coming to the notice of the Medical Officer of Health, will be offered the diagnostic facilities provided by the Regional Hospital Board after consultation with the general practitioner concerned, under general arrangements to be agreed with the Executive Council.

(b) The Medical Officer of Health will co-operate with the Regional Hospital Board in determining the need of patients for admission to hospital.

(c) A proportion (at present estimated at not less than one in ten) of permanent houses available for letting by the local health authority will be allocated to tuberculous families for rehousing so long as the need remains. This will be done on the recommendation of the Medical Officer of Health, and information thereanent will be made available to the National Assistance Board.

(d) Advice and assistance will be given by the Tuberculous Officer and Nurse Health Visitor, in agreement with the general practitioner, regarding safeguards to be observed in cases where persons suffering from tuberculosis are living at home.

(e) Boarding-out of child contacts from tuberculous families is meantime not practicable in this area. Such provision will be kept in mind should the circumstances alter. In default of such boarding-out, the local health authority will consider the provision of residential accommodation for such child contacts. Agreement will be reached with the Regional Hospital Board regarding co-operation in the provision of such preventorium accommodation.

(f) Night sanatoria are not meantime practicable in this area. Their provision will be considered in future developments.

(g) Garden shelters will be provided free on loan to tuberculous cases for whom they are recommended by the Medical Officer of Health.

(h) *Disinfection*.—Arrangements for the carrying out of such current and terminal disinfection for tuberculosis of such premises and fomites as the Medical Officer of Health directs will be made.

MEASURES FOR THE CARE OF PERSONS SUFFERING FROM TUBERCULOSIS AND FOR THE AFTER-CARE OF PERSONS WHO HAVE SO SUFFERED.

(a) *Supply of beds, bedding, etc.*—These requisites and such others as air beds, air rings, bed-pans, sputum flasks, etc., will be supplied on loan to tuberculous patients for whose isolation and/or treatment needs they are certified necessary by the Tuberculosis Officer in agreement with the general practitioner. Disinfectant, paper handkerchiefs and materials for dressings will be made available. Such articles will be held in the proposed central store (c.f. home nursing proposals), and will, on the recommendation of the Medical Officer of Health, be distributed from there. There will be close supervision by Nurse Health Visitors to ensure that items are properly used for furthering the adequate treatment and isolation of patients. Disinfection of all articles will, prior to their return to store, be arranged. Cod liver oil, malt and cold liver oil and similar preparations and vitamin concentrates may be given as preventive measures, and for this purpose will be stocked at clinics and other convenient premises. Additional nourishment to the maximum value of 10s. per week will be provided free to tuberculosis patients at home suffering from active disease, for whom the Tuberculosis Officer certifies it necessary, and who carry out the recommendations of the Tuberculosis Officer regarding measures for their observation and treatment, and for the prevention of the spread of infection.

(b) *After-Care and Rehabilitation*.—Full co-operation in the exchange of information and advice will be maintained by the Tuberculosis Officer with the Ministry of Labour in the resettlement of tuberculous persons in employment, or their entry into sheltered or home employment. Personal interviews with patients by the Tuberculosis Officer and the Disablement Resettlement Officer to reach agreement on their suitable resettlement, will be held when necessary. Recommendations will be made by the Tuberculosis Officers in agreement with the Disablement Resettlement Officer to the local health authority for consideration for employment in their service of tuberculous persons who are medically and otherwise suitable.

2. The executive and supervisory medical work required by these proposals will be carried out under the administrative control of the Medical Officer of Health by a Tuberculosis Officer, who will hold a combined appointment with the Regional Hospital Board.

Notifications of tuberculosis will be transmitted to the Tuberculosis Officer by the Medical Officer of Health in such manner as is agreed between them. The Tuberculosis Officer will inform the Medical Officer of Health of the established diagnosis in each notified case, of the findings relative to contacts and suspects, and of cases which he recommends should be removed from the tuberculosis register.

II. OPERATION OF ARRANGEMENTS.

3. *Co-ordination with Executive Council.*—Agreement will be reached with the Executive Council on measures for the co-ordination of the arrangements for home care with the work of general practitioners. General practitioners will be asked to collaborate with the Tuberculosis Officers with regard to after-care, and such measures of rehabilitation as the general practitioner and Tuberculosis Officer together think suitable.

Co-ordination with Tuberculous Orthopaedic Scheme.—The Tuberculosis Officers and Nurse Health Visitors will co-operate with the general practitioners, orthopaedic specialists and orthopaedic sisters doing home visitation, by exchange of information and recommendations in an agreed manner, to ensure that the facilities of the local health authority's proposals are made available as required in the interests of such patients and their families.

Co-ordination with School Medical Service.—The Executive School Medical Officer will be informed of all contacts who are of school age. He will be informed of all admissions to, and discharges from, hospital of school children.

Co-ordination with voluntary organisations.—The routine and special education and propaganda work carried out by Tuberculosis Officers and Nurse Health Visitors for patients and their households and for the general public will be conducted in close co-operation with such organisations as the National Association for the Prevention of Tuberculosis, and the Scottish Council for Health Education. Co-operation will also be maintained in the social work of the National Association for the Prevention of Tuberculosis or other organisations.

4. *Health Visiting*.—A service will be made available free for all established tuberculous cases on the tuberculosis register and for such contacts and suspect cases and families as the Medical Officer of Health considers necessary. The service will be provided in accordance with the proposals for Health Visiting. Nurse Health Visitors will, by agreement, carry out work for the Regional Hospital Board, including, if desired, work in clinics.

They will keep such records as the Secretary of State and the Medical Officer of Health require.

Home Nursing.—A service will be available to tuberculous cases. The Tuberculosis Officer will, in agreement with the general practitioner inform the Medical Officer of Health of cases for whom nursing visits are recommended and will specify the number of such visits required.

Domestic Helps for Tuberculous Cases.—The arrangements proposed for the provision of domestic helps where such are certified necessary by the Tuberculosis Officer in agreement with the general practitioner, on account of a tuberculous case, are stated in the proposals for Domestic Helps.

5. The Medical Officer of Health will, when requested, inform the Regional Hospital Board of the suitability of home conditions for the care of cases recommended for discharge.

Clerical staff of the local health authority will, by agreement, carry out work for the Regional Hospital Board, if desired.

Agreement will be reached between the local health authority and the Regional Hospital Board for the use of premises belonging to either, in which it is mutually agreed to hold clinics.

B. Other Services.

ARRANGEMENTS FOR CARE AND AFTER-CARE IN RELATION TO DISEASES OTHER THAN TUBERCULOSIS.

The services set forth under the various proposals made by the County Council under the National Health Service (Scotland) Act, 1947, will be available to all persons in the area suffering from any disabling illness, short or long term, and being cared for at home, in so far as the staffing position permits.

C. Estimated Cost of Service.

- | | | |
|---|--------|---------|
| (a) Cost of provision relating to tuberculosis | ... .. | £13,000 |
| (b) Cost of provision relating to other diseases provided
for in other National Health Service proposals | | — |

Approved at the Monthly Meeting of the County Council of the County of Lanark, held on Wednesday, the Seventh day of July, Nineteen hundred and forty-eight.

(Sgd.) JOHN MANN, Convener of County Council.

(Sgd.) JOHN C. CONNOR, Member of County Council.

(Sgd.) WM. C. BROWNLIE, County Clerk.

Approved by the Secretary of State for Scotland on 14th September, 1948.

(Sgd.) R. HOWAT, *Assistant Secretary*.

Department of Health for Scotland,
Edinburgh.

LANARKSHIRE HOUSE,
GLASGOW, C.I.

Section 28.

(1) A local health authority may make such arrangements as the Secretary of State may approve for providing domestic help for households where such help is required owing to the presence of any person who is ill, lying-in, an expectant mother, mentally defective, aged, or a child not over school age within the meaning of the Education (Scotland) Act, 1946.

(2) The local health authority may recover from any person availing himself of domestic help so provided such charge as the authority may determine, having regard to the cost of the arrangements.

Provided that the authority may remit the said charge in whole or in part if, in the circumstances of any particular case, they consider it reasonable to do so.

Scheme for Providing Domestic Help.

The institution by the County Council of this scheme for the provision of domestic helps does not confer a right on any individual to demand that a domestic help be supplied ; it must rest with the County Council—through the County Medical Officer of Health—to decide whether, having regard to all the circumstances of each individual case, any particular request can be met. All the provisions of the scheme are subject to this condition.

GENERAL.

1. *Categories of households covered.*—Any person may apply for the services of a domestic help for a household where such help is required owing to the presence of :—

- (a) A person who is ill.
- (b) An expectant mother.
- (c) A lying-in woman.
- (d) A mentally defective person.
- (e) An aged person ; or
- (f) A child not over school age within the meaning of the Education (Scotland) Act, 1946.

2. *Medical certification.*—Medical certification will be required and should be submitted with the application if the service of a domestic help is indicated by reason of illness, except in the case of women in categories (b) and (c) already known to the Public Health Department. In cases where illness is not the cause, certification of the conditions in the individual household will be required from the Health Visitor. Medical extension certificates will be necessary only in exceptional circumstances.

Appropriate medical certificate forms will be issued to medical practitioners along with franked envelopes ; but it will not be obligatory to use this form of request.

3. *Application for the service.*—Forms of application—see Appendix I—will be issued on request from the Public Health Department and will also be obtainable from health visitors, midwives, school nurses and nurses undertaking home nursing duties.

The form must be completed and sent to the County Medical Officer of Health, County Buildings, Beckford Street, Hamilton, within a reasonable time of the service being required, except in cases of emergency. An assessment of the needs of the case will then be made and the charge, if any, to be met by the applicant determined in accordance with the local health authority's scale in operation at the time. The full (standard) charge will be payable unless the applicant considers himself unable to pay it and gives particulars in support of a claim for a reduced charge. If the applicant agrees to meet the assessment a domestic help will be assigned.

All contributions by the applicant must be paid in advance unless in an emergency, where the proportion of the fee, if any, should be paid immediately after the help takes up duty.

In such emergency cases, should the appropriate fee, if any, not be paid within 14 days, the domestic help will be withdrawn.

The help will not be authorised where there is a near relative who is capable and free to undertake the duties.

4. *Domestic helps to be employed.*—The local health authority will provide domestic helps :—

- (a) By the employment of whole-time domestic helps ;
- (b) By utilising approved women for part-time duties ;
- (c) By arrangement with neighbouring women in rural areas where regular helps are unable to attend owing to transport or other difficulties.

The local health authority will endeavour to secure that any woman appointed as a domestic help will be of good character, have some knowledge of plain cooking, be clean in her person and home, and preferably have some knowledge in the care and upbringing of children. While that is so, no guarantee can be given, and it must be clearly understood as an essential condition of the scheme, that the local health authority will not hold themselves responsible for any misdemeanor on the part of the domestic help, or for any loss or damage which may occur while the domestic help is employed in the applicant's home.

An official badge of office will be supplied to all approved domestic helps, to be worn while on duty.

5. *Duties of domestic helps.*—These are set forth in the Rules for the Guidance of Domestic Helps—see Appendix II.

The maximum number of hours per day which the domestic help is required to work is 8, excluding one hour for a meal. The normal hours of duty are from 8 a.m. to 5 p.m., but these may be liable to modification to suit individual needs ; similarly, the domestic help may be engaged for a lesser number of hours per day. Any case where attendance is given by reason of confinement, the help will work on Sunday, if Sunday falls within three days of the confinement. In such other cases as, in the opinion of the Medical Officer of Health, domestic help is required on Sundays, facilities will be provided.

6. *Remuneration of domestic helps.*—The wages paid to domestic helps shall be in relation to those agreed for domestic workers in hospitals and similar institutions. Reasonable travelling expenses will be paid where necessary. Helps will provide their own food when on duty. No supplementary gratuity must be paid by the households where the helps are employed.

SUPERVISION.

7. The service will be under the control and direction of the County Medical Officer of Health.

The local health authority will appoint a whole-time supervisor who shall act under the direction of the County Medical Officer of Health. She shall exercise supervision over all domestic helps, visit them at intervals in their own homes and at their work, and undertake not only such executive control as the Medical Officer may direct, but shall perform propaganda work in connection with the recruitment of new helps.

TUBERCULOSIS CASES.

8. *Domestic helps for tuberculosis cases.*—A domestic help will be provided for households for which the Tuberculosis Officer certifies it necessary on account of a tuberculosis case. The arrangements for the provision of such a service will be the same as those for ordinary home helps as regards (a) application for the service and assessment of charge, if any, to be met by the applicant ; (b) duties of domestic helps ; (c) remuneration of domestic helps ; and (d) supervision.

9. *Domestic helps to be employed.*—Only whole-time domestic helps not under the age of 45 years and specially recruited for this work, will be employed. They will have the infectious nature of the disease explained to them and will be instructed in the necessary precautions to be taken against it. In addition to their satisfying the conditions for approval of their employment by the local authority which apply to other domestic helps, they will require to be medically certified as suitable for employment involving contact with tuberculosis cases. Medical investigation before such certificates can be given, will be that required for employees in tuberculosis hospitals and will include testing of tuberculin reaction and X-ray examination of the chest. There will be regular X-ray examinations of the chest during employment and on leaving it.

Households eligible for domestic helps through the Tuberculosis Scheme will be those :—

- (a) Where the mother or housekeeper suffers from tuberculosis causing incapacity, and is at home ;
- (b) After the mother or housekeeper, suffering from tuberculosis, is removed to sanatorium, for such time as will allow disinfection of the premises to be carried out and until an ordinary domestic help takes over ;

- (c) Where the care of a tuberculosis case in the home makes it necessary for the mother or housekeeper to have assistance with household duties.

AREA ARRANGEMENTS.

10. It is not proposed to lay it down that domestic helps should be employed in specific areas, but applications from a particular area will be met by helps (if any) resident in that area. In districts where there are none, helps from adjacent areas will provide the service, and the employment of a neighbour is not excluded where there is no domestic help resident within a reasonable distance or where transport facilities are inadequate.

In very isolated areas arrangements may be made for the helps to remain overnight provided there is suitable accommodation. Any such arrangement must be a private one between the applicant and the domestic help—the local health authority being responsible only for payment for a maximum daily period of 8 hours.

ESTIMATED COST OF THE SERVICE.

11. It is estimated that the cost of the services to the local health authority for the period from the appointed day until 15th May, 1949, will be £10,000.

During the same period it is estimated that the sums which will be recovered will amount to £1,500.

APPENDIX I.

PUBLIC HEALTH DEPARTMENT.

Application for Services of Domestic Help.

Name of Applicant

Address

.....

.....

Reason for domestic assistance

.....

.....

If attendance necessary on account of confinement, state probable date
of deliveryState date when it is desired domestic help should commence
duty

Period help required :—

*Days.**Hours.*

.....

from to

Name of family doctor

The standard charge for domestic help is per hour. If the
applicant considers that a reduced charge would be appropriate
in his case, the following particulars must be given :—

Annual amount paid for (a) Rent (b) Rates.....

APPENDIX II.

Rules for the Guidance of a Domestic Help.

(1) She shall undertake duty in any household to which she has been assigned.

(2) She must attend daily at the home to which she is sent from 8 a.m. to 5 p.m., or such other hours as are considered necessary and desired by the patient. In no case must the help be required to work more than eight hours per day.

(3) She must undertake the ordinary duties normally falling to the housewife which could reasonably be undertaken in the time that her attendance is authorised.

(4) If the patient is under medical or nursing care, the domestic help must not interfere with the instructions given, but she will be expected to co-operate in giving ordinary housewife care to the patient.

(5) Where the local health authority has agreed to provide the services of a domestic help; a written order is issued stating the name and address of the household requiring her services. Without such written order, no payment will be made.

(6) The domestic help must intimate to the local health authority when she commences duty in each case.

(7) She must supply and cook her own food, and not use the food provided by the family for whom she works, unless the family care to come to an amicable arrangement with her.

(8) Where a case of infectious disease occurs in the house of a domestic help or in the family of the patient, or should the domestic help in any way come into contact with infection, she must report at once to the PUBLIC HEALTH DEPARTMENT (Telephone, Hamilton 292) for instructions.

(9) Payment will be made by the local health authority in the case of part-time helps as soon as proof is obtained of satisfactory service. The rate of pay of such helps will be the current rate approved by the local authority, less National Health Insurance and Unemployment contributions. NO CHARGE MUST BE MADE TO THE PATIENT NOR PRESENTS ACCEPTED FROM THE PATIENT. Bus fares will be allowed in approved circumstances.

(10) Any conduct on the part of the domestic help which is contrary to the interests of the household where she is employed, may, if brought to the notice of the local health authority, lead to her name being removed from the list.

(11) If a domestic help desires to terminate her service, or if on account of ill-health she is unable to undertake the duties, she must inform the local health authority without delay.

(12) Domestic helps are specially warned that THEY MUST NOT, under any circumstances, GOSSIP about the affairs of the families to which they have been sent.

The foregoing proposals, approved at the Monthly Meeting of the County Council of the County of Lanark, held in Lanarkshire House, Glasgow, on Wednesday, the fifth day of May, Nineteen hundred and forty-eight, are signed for and on behalf of the said County Council by John Mann, Convener, and Robert M'Cracken, Member of County Council, and William C. Brownlie, County Clerk.

(Sgd.) JOHN MANN, Convener of County Council.

(Sgd.) ROBERT M'CRACKEN, Member of County Council.

(Sgd.) WM. C. BROWNLIE, County Clerk.

Approved by the Secretary of State for Scotland.

(Sgd.) T. D. HADDOW, *Assistant Secretary*.

Department of Health for Scotland,
EDINBURGH, 3rd July, 1948.

LANARKSHIRE HOUSE,
GLASGOW, C.1.

Proposals under Sections 27 and 51.

MENTAL HEALTH SERVICES.

Section 27.

(1) A local health authority may, with the approval of the Secretary of State and to such extent as the Secretary of State may direct shall, make arrangements for the purpose of the prevention of illness, the care of persons suffering from illness or mental deficiency, or the after-care of such persons, but no such arrangements shall provide for the payment of money to such persons, except in so far as they may provide for the remuneration of such persons engaged in suitable work in accordance with the arrangements.

(2) The local health authority may recover from any person availing himself of any such service provided under this Section as may be prescribed, such charge as the authority may determine, having regard to the cost of the service.

Provided that the authority may remit the said charge in whole or in part if, in the circumstances of any particular case, they consider it reasonable to do so.

(3) A local health authority may, with the approval of the Secretary of State, contribute to any voluntary organisation including among its objects any such purpose as aforesaid.

Section 51.

(1) It shall be the duty of the local health authority to provide or secure the provision of suitable training and occupation for :—

- (a) Persons under the age of sixteen who have been reported by the education authority under Section 56 of the Education (Scotland) Act, 1946, as having been found incapable of receiving education or training in a special school ;
- (b) Mental defectives over the age of sixteen.

Provided that this sub-section shall not apply in the case of mental defectives in mental deficiency institutions.

(2) Section 21 of this Act (which requires local health authorities to submit proposals to the Secretary of State for carrying out their duties under certain provisions of Part III of this Act and to carry out those duties in accordance with the proposals) shall apply with respect to the duties of local health authorities under the Lunacy (Scotland) Acts, 1857 to 1913, the Mental Deficiency (Scotland) Acts, 1913 and 1940, and this Part of this Act.

(3) Where a local health authority make arrangements with any voluntary organisation for the performance of any services in connection with the duties of the local health authority under the Mental Deficiency (Scotland) Acts, 1913 and 1940, or this Part of this Act, the local health authority may, with the approval of the Secretary of State, contribute to that voluntary organisation.

(4) This Section shall come into force on the appointed day.

On the appointed day the facilities at present available will be continued. The proposed extensions outlined in the following proposals will be developed as soon as staff and accommodation become available.

GENERAL ORGANISATION.

The local health authority will provide a comprehensive plan covering the requirements of the above Sections in so far as they pertain to the discharge of their duties relating to mental defectives and persons of unsound mind. It includes :—

- (a) The appointment of appropriate medical officers and specialists to give guidance, advice or treatment to persons mentally defective, of unsound mind, or persons who are mentally affected in any degree and also to provide the certification required in any particular case ;
- (b) the appointment of authorised officers to undertake the statutory duties laid down ;
- (c) arrangements for the ascertainment of mental defect either under Section 56 or 57 of the Education (Scotland) Act, 1946, as well as those under Section 2 (5) and Section 9 of the Mental Deficiency and Lunacy (Scotland) Act, 1913 ;
- (d) the provision of suitable training and occupation for mental defectives under the age of 16 who are found unsuitable for education in a special school or class and for mental defectives over the age of 16 years, who are not in institutions.

The functioning of the proposals will, in general, be under the direction and control of the Medical Officer of Health, who will, in all clinical matters, have available to him—by arrangement with the Regional Hospital Board—a psychiatrist of consultant status.

MEDICAL OFFICERS.

Medical practitioners, approved by the Board of Control as Certifying Medical Officers for the purpose of certifying mental defectives (see Appendix), will be appointed and will be available to authorised officers in each area. For emergency needs each will require to nominate a deputy who shall in turn nominate his deputy. Each such deputy shall be a practitioner approved, as already indicated, and will normally be the Certifying Medical Officer of an adjoining or contiguous area. By arrangement with the Regional Hospital Board, a consultant psychiatrist will be available to these medical officers for consultation either in the patient's home or at prearranged clinics (*vide infra*). Payment for these services will be in accordance with any agreement arrived at by negotiation.

By arrangement with the Local Executive Council, medical practitioners will be made available to grant certificates under the Lunacy and Mental Deficiency (Scotland) Acts.

AUTHORISED OFFICERS.

Authorised officers will be appointed for the following purposes :—

- (i) To take the necessary action for the detention of persons apparently of unsound mind who have no relatives or friends willing and able to do so. The authorised officer may proceed by way of a petition to the Sheriff under the ordinary procedure of Section 14 of the Lunacy (Scotland) Act, 1862, or by way of an application to the Sheriff under the procedure of Section 15 of the 1862 Act relating to dangerous lunatics, or by arranging for the patient to be received under guardianship under Section 13 of the Lunacy (Scotland) Act, 1866.

The local health authority will endeavour to ensure that persons suffering from mental illness will, if suitable, be given the opportunity of receiving institutional treatment as voluntary patients.

- (ii) To make representations through the Medical Officer of Health to the Medical Superintendent of a mental hospital when it is proposed to discharge a lunatic from that hospital and the officer considers that adequate arrangements have not been made for the welfare of the lunatic in the event of his discharge.
- (iii) To take steps for the removal to a place of safety, pending the presentation of a petition, of a supposed defective who is neglected, abandoned, cruelly treated, or without visible means of support.

Note.—A place of safety would include the observation wards for mental cases which, it is hoped, will be set up in the general hospital.

- (iv) To undertake the outdoor supervision of mental defectives under guardianship and the after-care of patients discharged from hospital. This work they will carry out in association with any psychiatric social workers appointed.

The local health authority will be prepared, at the request and on behalf of the Hospital Board, to supervise certified lunatics who may be under guardianship, boarded-out, or liberated on probation from a mental hospital at or to an address within the area of the local health authority.

The authorised officer will take any steps necessary to safeguard the property of persons committed to mental hospitals or certified institutions for defectives.

The authorised officers will be persons who have had experience of the duties of local authorities in relation to mental illness and for this purpose the present Relieving Officers would be appointed, in a part-time capacity, to the Public Health Department for the purposes of the Act. The present personnel consists of one director and nine area officers. They would operate from the following centres, viz. :—Biggar, Lanark, Lesmahagow, Larkhall, Blantyre, Cambuslang, Bishopbriggs, Bellshill and Shotts. It is expected that these officers, as well as undertaking the duties under the Mental Health Scheme, would still be Clerks to the District Councils.

ASCERTAINMENT OF MENTAL DEFECT IN PERSONS OVER 16 YEARS.

The main source of ascertainment will be by means of the records of the School Medical Department. These will be submitted to the Medical Officer of Health on the child attaining the age of 16 years. In cases of doubtful mental defect coming to the notice of this department after the age of 16 years, the services of the School Medical Officer may be utilised in the assessment of such cases.

Steps will also be taken to ensure that the services available under these proposals are made widely known to all medical practitioners, health visitors, district nurses and health workers generally. The attention of Court officers will also be drawn to the provisions.

It will be the duty of the authorised officer to maintain a close liaison with all agencies within his area, through which agencies persons who may be mental defectives requiring to be dealt with at the instance of the authority may come to notice. The authorised officer will also arrange for the appropriate medical advice to be obtained when required in dealing with these cases.

CONSULTATIVE CLINICS.

If desired by the Regional Hospital Board, Specialist Consultative Clinics could be set up in the more populous areas and conducted at such regular intervals as the circumstances necessitate. The clinic at Bellshill Health Institute could be continued and others could be held at the other Health Institutes should demand warrant it. If

constituted, these clinics would be available to any practitioner having a case of doubtful mental illness in his charge. Not only would new cases be accepted, but they would also be open for purposes of after-care to patients discharged from mental hospitals and for advice and guidance to those not in need of in-patient care. Nursing and clerical staff would be arranged for by the utilisation of the local health authority's staff.

ACTION IN RESPECT OF MENTAL DEFECTIVES.

Educable under 16 years of age.—It remains the statutory duty of the Education Authority to make provision for the education or training of such cases in a special school.

At present there are four such schools—Drumpark, Dalton, Knowetop and Auchinraith—the former two being in the landward area and the latter two in the Burgh of Motherwell and Wishaw and Hamilton respectively. These will continue to be utilised. The ultimate aim will be to make increased provision of this type of school and recommendations will be submitted to attain this object in collaboration with the Education Authority for facilities in Lanark, Shotts, Chryston, Bellshill and probably Bishopbriggs.

A Child Guidance Clinic will, in conjunction with the Education Authority, be set up centrally—say in Motherwell, as soon as adequate staff can be obtained. The local health authority will make available the services of a Psychologist and Speech Therapist, as also social workers, and by arrangement with the Regional Hospital Board, a Psychiatrist will also be in attendance.

Under 16 years of age and unsuitable for education in a special school or class.—Such cases are meantime reported to the General Board of Control and the local authority with a view to their admission to a certified institution, or, if suitable, to their being left in the care of their parents. Additional institutional accommodation is urgently required but this will be for the central authorities.

For those who are trainable the aim will be in collaboration with the Education Authority to set up in close proximity—but not in the same building—to the existing and proposed special schools a suite of accommodation with adequate garden space where training in simple handcrafts, e.g. knitting, sewing, weaving, rug-making, gardening, etc., would be given; such persons would also receive instruction directed to personal hygiene, proper speech, dressing themselves, table manners, good posture and movements, etc.

The required staff for such work would be a combination of full-time paid officials and voluntary workers: the former would undertake the more specialised work, e.g., the buying of the necessary unworked materials and the selling of the finished article, and the latter the more general entertainment, occupation and personal type of instruction such as indicated above.

Mental defectives over the age of 16 years.—These would be provided for—in separate accommodation—at the above-mentioned centres.

An arrangement will be made to convey all such to the appropriate place by motor transport—probably by arrangement with the Education Authority, by extending the use of special school or other buses.

GENERAL.

Every endeavour will be made to secure—at least in the initial stages, in collaboration with the Regional Hospital Board—the services of psychiatric social workers. Two such officers provided with motor cars should be appointed and would work under the immediate control of the Consultant Psychiatrist and would be available, not only for after-care of patients dismissed from hospital, but also to give such advice and after-care as may be requested by medical officers, authorised officers and other health workers.

In a scattered area such as this County, there will be a need to provide for cases who, by reason of the geographical position of their homes, cannot be collected each day and whose parents may refuse sanction to their admission to a mental institution. The aim will be, therefore, to set up a Residential Occupational Centre—this will be in all respects similar in its provisions to what has been already described but with the addition of dormitories, day rooms, etc., with the necessary administrative and kitchen facilities. The most suitable location for this would be in the central area of the County, and priority of admission would be given to those who, from the point of view of daily collection, come from the least accessible addresses, no matter where, in the County. To begin with, accommodation would be provided for 30—with scope for expansion should the demand require it.

It is recognised that some parents may not be willing to allow their children to be removed to any institution. For such, if, in fact, the need arises, consideration will be given to the appointment of an instructress, or instructresses, who will be provided with cars to undertake the training of such defectives in their own homes.

VOLUNTARY ORGANISATIONS.

In the pre-war period there were voluntary After-care Committees in Hamilton, Cambuslang, Coatbridge and Airdrie and Motherwell. Hamilton committee has continued in being and is still functioning.

As a first step, through the local branch of the Scottish Association for Mental Hygiene, an endeavour will be made to restart these committees in Cambuslang, Coatbridge and Airdrie and Motherwell.

The aims of these committees will be :—

- (a) to undertake, when required, in consultation with the other mental health workers mentioned above, the supervision and visitation of mentally defective children and adults outside institutions ;
- (b) to assist in finding suitable employment ; and
- (c) to collate information in all its aspects regarding defectives.

Collaboration will be maintained and developed with the Scottish Association for Mental Hygiene.

ESTIMATED EXPENDITURE FOR PERIOD 5TH JULY, 1948, TO
15TH MAY, 1949.

(i) Salaries of staff (including authorised officers) employed by the authority	... ..	£1,500
(ii) Cost of providing and maintaining training or occupation centres	... ..	500
(iii) Payments to voluntary organisations	... ..	300
(iv) Other expenditure (any substantial items to be specified)	...	700

Approved at the Monthly Meeting of the County Council of the County of Lanark, held on Wednesday, Seventh day of July, Nineteen hundred and forty-eight.

(Sgd.) JOHN MANN, Convener of County Council.

(Sgd.) JOHN C. CONNOR, Member of County Council.

(Sgd.) WM. C. BROWNLIE, County Clerk.

* Approved by the Secretary of State subject to the modifications set out in statement of this date.

(Sgd.) R. HOWAT, *Assistant Secretary*.

Department of Health for Scotland,
EDINBURGH, 30th October, 1948.

LANARKSHIRE HOUSE,
GLASGOW, C.I.

* The modifications referred to have been given effect to in the above proposals.

APPENDIX

Name	Address	Qualifications
MacLagan, Dr. P. A. ...	Glengorin, Biggar ...	M.B., Ch.B., Ed., 1899.
Marshall, Dr. Robert ...	Morven, Biggar ...	M.B., Ch.B., Glas., 1906.
Burns, Dr. G. W. ...	Viewfield, Rigside, Douglas Water ...	M.B., Ch.B., Glas., 1940.
Lornie, Dr. Albert C. ...	Maplebank, Leadhills, Abington ...	L.R.C.P., L.R.C.S., Ed., L.R.F.P.S., Glas., 1920.
Barr, Dr. Peter ...	188 Carlisle Road, Kirkmuirhill ...	M.B., Ch.B., Glas., 1929.
Somerville, Dr. O. M. ...	Kilncroft, Ayr Road, Douglas ...	M.D., Glasgow, 1928. M.B., Ch.B., 1923.
McFarlane, Dr. David ...	Ingleneuk, Coalburn ...	M.B., Ch.B., Glas., 1915.
Martin, Dr. T. G. H. ...	Abbotshall, Lesmahagow ...	B.Sc., M.B., Ch.B., Glas., 1926.
Galbraith, Dr. W. A. ...	Curatehill, Law ...	M.B., Ch.B., Glas., 1920.
Banks, Dr. T. Watson ...	Mervyn, Hope Street, Lanark ...	M.B., Ch.B., Edin., 1926.
McClellmont, Dr. J. E. ...	91a Lanark Road, Carstairs ...	M.D., Glas., 1941, M.B., Ch.B., 1933.
Muill, Dr. Robert ...	Laureldene, 80 Clyde Street, Carlisle ...	M.B., Ch.B., Glas., 1923.
Beattie, Dr. Sarah E. S. ...	Mansefield, Carnwath ...	M.B., Ch.B., B.A.O., N.U.I. 1930.
Parker, Dr. John ...	Sudbury House, Larkhall ...	M.B., Ch.B., Glas., 1925.
Gibb, Dr. Harry A. ...	3 Machan Avenue, Larkhall ...	M.B., Ch.B., Glas., 1933.
Burns, Dr. James N. G. ...	Invergordon, 5 Douglas Street, Larkhall ...	L.R.C.P., L.R.C.S., Edin. L.R.F.P.S., Glas., 1943.
Shearer, Dr. James H. ...	Greenside House, Strathaven ...	M.B., Ch.B., Glas., 1917.
Murray, Dr. J. A. ...	7 King Street, Stonehouse ...	M.B., Ch.B., Glas., 1925.
McEwan, Dr. Archibald ...	Cadzow Bank, Union Street, Hamilton ...	M.B., Ch.B., Glas., 1925.
Hope, Dr. Walter ...	Croftpark, High Blantyre ...	M.B., Ch.B., Glas., 1921.
Gordon, Dr. Arthur A. ...	Parkville, Glasgow Road, Blantyre ...	M.B., Ch.B., Edin., 1928.
Stewart, Dr. Adam ...	Clifton, 327 Glasgow Road, Blantyre ...	M.B., Ch.B., Glas., 1924.
McLaren, Dr. John ...	The Lodge, East Kilbride ...	M.B., Ch.B., Glas., 1923.
Cowan, Dr. James M. ...	85 Eastwood Mains Road, Clarkston, Glasgow	M.B., Ch.B., Glas., 1932.
Mydd, Dr. J. Lowdon ...	388 Main Street, Bellshill ...	M.B., Ch.B., Glas., 1926.
McKenna, Dr. J. J. ...	The Mains, Calder Road, Mossend ...	L.R.C.P., L.R.C.S., Ed., L.R.F.P.S., Glas., 1925.
McFarlane, Dr. James ...	Dunalistair, Chapelhall ...	M.B., Ch.B., Glas., 1906.
Fitchell, Dr. D. S. ...	Hawthornlea, Uddingston ...	M.B., Ch.B., Glas., 1917.
Lark, Dr. John Y. ...	Ardenvoehr, Bellshill ...	M.B., Ch.B., Glas., 1938.
Macameron, Dr. John ...	Kingston, Tannochside, Uddingston ...	M.B., Ch.B., Glas., 1909.
Hamilton, Dr. J. Forrest ...	77 Main Street, Bothwell ...	M.D., Glas., 1932, M.B., Ch.B., 1919.

Name	Address	Qualifications
Findlay, Dr. A. S. ...	Dunard, Clydesdale Road, Mossend ...	M.B., Ch.B., Glas., 1910.
M'Dougall, Dr. R. S. ...	Redhurst, Carfin	M.B., Ch.B., Glas., 1936.
Bell, Dr. John S. ...	Caldergrove, Merry Street, Motherwell ...	M.B., Ch.B., Glas., 1924.
Hinds, Dr. John ...	Lytham, Station Road, Shotts	M.B., Ch.B., Glas., 1928.
M'Laughlan, Dr. S. H. P.	Viewbank, Harthill	M.B., Ch.B., Glas., 1925.
Logan, Dr. D. Dale ...	Woodside, Newmains	F.R.S. Ed. M.D. Glas., 1906, M.B., Ch.B., 1900, F.R.F.P.S. Glas., 1921, D.P.H., R.C.P.S., Ed. 1909.
Macgregor, Dr. Norman S. R.	197 Station Road, Shotts	M.B., Ch.B., Glas., 1930.
Hall, Dr. J. Moore ...	Ballcarres, Shotts	M.D. (Commend.) Glas., 1937, M.B., Ch.B., 1920.
M'Indewar, Dr. Ian ...	171 Main Street, Salsburgh	M.B., Ch.B., Glas., 1938.
Carey, Dr. James M. W.	Maxwelton, Cleland	L.R.C.P., L.R.C.S., Ed. L.R.F.P.S., Glas., 1943.
Hutchison, Dr. Benjamin	14 Douglas Drive, Cambuslang	M.B., Ch.B., Glas., 1908.
Low, Dr. R. L.	4 Viewpark Drive, Burnside, Rutherglen	M.B., Ch.B., Glas., 1931.
Russell, Dr. A. C. ...	Midholm, Clarkston, Glasgow	M.B., Ch.B., Glas. (Commend), 1905. D.P.H., R.C.S., Ed., 1908.
Milne, Dr. T. B.	5 Calder Drive, Cambuslang	M.B., Ch.B., Glas., 1932.
Miller, Dr. James B. ...	Brownswood, Bishopbriggs	M.D., Glas. (Commend.) 1905, M.B., Ch.B. (Commend), 1898, Glas., D.P.H., R.C.P.S., Ed. and Glas., 1909.
Stothers, Dr. Walter W.	St. Brinnans, Muirhead Road, Baillieston	M.B., Ch.B., Glas., 1929.
Thomas, Dr. David ...	Mansfield, Tollcross, Glasgow, E.2 ...	M.A., Ed., 1889, M.D., 1898, M.B., C.M., 1893.
Longwill, Dr. David ...	24 Hallhill Road, Springboig, Shettleston, Glasgow, E.2.	M.B., Ch.B., Glas., 1900.
MacInnes, Dr. Duncan	Clifton House, Baillieston	M.B., Ch.B., Glas., 1938.
Scouller, Dr. S. C. ...	Mossgiel, Clark Street, Airdrie	M.B., Ch.B., Glas., 1923.
Cockburn, Dr. T. A. ...	1 Johnstone Road, Gartcosh, Glasgow ...	M.B., Ch.B., Glas., 1942.
Robertson, Dr. James D. P.	Cliffevale, Muirhead, Chryston	M.B., Ch.B., Glas., 1943.